

To consider

Revalidation: Progress Report

Issue

1. A progress report on the revalidation work programme.

Recommendations

2.
 - a. To consider the progress report (paragraph 7 and Annex A).
 - b. To agree that Council should delegate to the Continued Practice Board the review of submissions from the medical Royal Colleges on standards and evaluation methods in advance of the consultation exercise (paragraphs 8-15).

Further information

3. If you require further information about this paper, please contact us by email: gmc@gmc-uk.org or tel. 0161 923 6602

Background

4. Key Aim Three of the 2009 Business Plan is to 'enhance assurance that licensed doctors are up to date and fit to practise by introducing licences to practise and preparing for revalidation.'
5. Underpinning Key Aim Three are objectives:
 - a. Introduce the licence to practise.
 - b. Establish the UK Revalidation Programme Board (UKRPB) to oversee the implementation of revalidation.
 - c. Pilot and deliver the changes needed to support revalidation, working in conjunction with the Department of Health (England) and the devolved administrations.
 - d. Develop standards and evaluation methods, working with the medical Royal Colleges and the Academy of Medical Royal Colleges.
 - e. Develop and consult on guidance showing how revalidation will work.
6. In January 2009, Council agreed the Project Initiation Document (PID) for revalidation. This sets out the 12 work streams that form the building blocks for the implementation of revalidation.

Discussion

7. Key Aim Three is being taken forward through the work streams set out in the Revalidation PID. The report at Annex A sets out the progress against those work streams.

Recommendation: To consider the Progress Report at Annex A.

UKRPB

8. The UKRPB met on 8 December 2009. The items considered included:
 - a. Reports from each of the Delivery Boards about progress towards readiness based on the milestones and actions in the readiness plan.
 - b. Developing a high level risk register with input from all key interests.
 - c. A paper from the Department of Health (England) on the framework for the development of impact assessments which will be informed by the outcomes of the pathfinder pilots.
 - d. A further paper on planning the implementation of revalidation which will inform the consultation document that is due to be published following the Council meeting in February 2010.

- e. A paper on project and pilot strategy providing a framework for co-ordinating future activity across all four UK countries to ensure that learning is shared, opportunities for joint work are optimised and that all areas of revalidation that require piloting or testing have been identified and that there are no gaps. The UKRPB will have a pivotal role in ensuring that there is a co-ordinated UK approach, and that learning is appropriately shared.

Continued Practice Board

9. When the Continued Practice Board met on 7 September 2009 it considered a number of papers about aspects of revalidation and made progress on a number of specific areas. At that meeting, CPB agreed that the GMC's consultation exercise on revalidation (due to begin in February 2010) should address key issues through a single consultation exercise. The issues to be covered include:

- a. The specialist standards and evaluation method proposed by the medical Royal Colleges.
- b. The revalidation model.
- c. The *Good Medical Practice* framework.
- d. Criteria and principles for MSF as part of revalidation.
- e. The role of CPD in revalidation.
- f. Proposals for implementing revalidation.

10. CPB also agreed a process and framework for evaluating the submissions from the Colleges on specialist standards and evaluation methods and established a sub-group involving Council members who are on CPB or the GMC/Academy group to review the proposals.

11. We have now received the submissions from all of the Colleges. The submissions are firstly assessed by members of staff in the Revalidation team against the criteria and principles agreed by CPB and that written assessment is being considered by members of the sub-group together with the submissions themselves.

12. The framework for evaluating the submissions is built around the need to satisfy five key principles:

- a. Consistency.
- b. Confidence.
- c. Fairness, objectivity, transparency and freedom from unfair discrimination.
- d. Practicality and proportionality.

e. Robustness.

13. There are fourteen separate submissions to consider. All of the submissions use the *Good Medical Practice* Framework as the basis of their proposals but most of the Colleges have submitted extensive additional information to support their submissions. We are returning to the Colleges from time to time to seek further clarity or further information as appropriate.

14. The Continued Practice Board will consider the results of this exercise when it next meets on 14 December 2009. Members of the Board will have sight of all of the documents submitted by the Colleges but will focus on the assessments undertaken by the sub-group and will take advice from the sub-group on whether each of the submissions has met the principles and criteria set by the Board. Once the Board is content, it will agree the standards and evaluation methods on a specialty by specialty basis. The versions of the *Good Medical Practice* Frameworks will then form part of the revalidation consultation in 2010.

15. Because of the extensive nature of the submissions and the necessarily detailed nature of the review work, it would be impractical for the proposals to be considered by Council as a whole. Of course, Council will need to agree the revalidation consultation document, the consultation framework and the questions to be posed but it would be helpful if Council agreed that the review of the submissions from the Colleges be delegated to the Continued Practice Board for agreement.

Recommendation: To agree that Council should delegate to the Continued Practice Board the review of submissions from the medical Royal Colleges on standards and evaluation methods in advance of the consultation exercise.

Communications and Engagement

16. Keith Pearson (the chair of UKRPB) has continued his series of meetings with senior officials in each of the four UK countries to discuss the progress that the four delivery boards are making. He met with Dr Michael McBride, Chief Medical Officer for Northern Ireland, on 6 November 2009.

17. Peter Rubin continues to meet with groups of doctors in various parts of the country to discuss a range of issues, including revalidation. He also delivered the keynote address at the BMA SAS Conference on 23 November 2009 and spoke at the Federation of Independent Practitioner Organisations on 24 November 2009. Other Council members and staff have continued to speak at conferences and meetings about revalidation to a wide variety of public and professional audiences. On 21 October 2009 we participated in a conference in Cardiff about revalidation along with a number of other organisations including the Welsh Assembly Government, the Wales Deanery for Postgraduate Medical and Dental Education, the Academy of Medical Royal Colleges and the BMA.

18. We contributed to a session at the NHS Employers conference on 4 November 2009, and Professor Malcolm Lewis contributed to an interactive session on revalidation at the Medical Directors Conference on 27 November 2009.

19. We continue to work with all of our key stakeholders through the Communications Forum established by the UKRPB. We are focusing particularly on planning for the consultation in 2010 which will include a series of events across all four countries and the use of a variety of vehicles to communicate our messages on revalidation. We will also ensure that there are a wide variety of avenues to allow people to engage in a meaningful way with our proposals.

Resource implications

20. None arising directly from this paper.

Equality

21. A partial impact assessment is being prepared on those elements of the PID for which we are responsible. This will be published with the GMC's revalidation consultation in February 2010.