

<b>Agenda item:</b>	<b>5.2</b>
<b>Report title:</b>	<b>Wales progress update</b>
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<b>Action:</b>	<b>To note</b>

### **Executive summary**

The annexed report updates the Board with the latest information on the progress of revalidation in Wales.

### **Recommendation**

The Revalidation Advisory Board is asked to note the update report.

## 5.2 – UK progress updates – Wales

### 5.2 – Annex

#### UK Revalidation Advisory Board Progress Update: Wales

To facilitate reporting, we have structured this update in accordance with the Board's objectives.

##### a. Revalidation delivery progress

#### Revalidation recommendations to end January 2016 (cumulative)

	Drs connected	Approved recs	Approved recs to revalidate	Approved requests for deferral (insufficient evidence)	Approved requests for deferral (ongoing process)	Approved notifications of failure to engage
No	6,732	5,915	5,249	620	34	12
%		88%	78%	9%	0.5%	0.2%

#### Appraisal completion figures 1 April 2015 – 31 December 2015

Designated Body <sup>1</sup>	Prescribed Connections	Doctors Due between Apr + Dec	Meetings Completed	Appraisals Completed (summary agreed) <sup>2</sup>	% Appraisals completed Apr-Dec (based on Drs due in this period with agreed summaries)
<b>NHS</b>	6554	4761	4016	3904	82%
<b>Independent</b>	7	7	6	6	86%

##### b. Integrity of the revalidation model

We are currently piloting **Revalidation Quality Assurance Visits** to Designated Bodies based on the NHS England Independent Verification model. To date 2 Designated Bodies have been visited. The visits focus on the following areas:

<sup>1</sup> NB these figures are taken from MARS, the online system. Only 1 independent body in Wales currently uses MARS

<sup>2</sup> A completed appraisal is counted as one where the appraisal summary has been written and agreed by the doctor. There is necessarily a time lag at the end of each quarter while summaries are written and agreed

- Revalidation processes and structures
- Underpinning systems: appraisal and governance

A report on the pilot will be considered at the March meeting of the Wales Revalidation Delivery Board but early indications are that the process has been of benefit to both the visitors and the visited DB, and has identified areas of good practice as well as potential areas for development.

Alongside this we are finalising a new format **Annual Appraisal and Revalidation Report** (akin to the NHS England AOA process) which streamlines our existing revalidation progress and appraisal quality management reporting processes. The new format report will be based on the same areas identified above to provide a more holistic and coherent view of assurances about revalidation processes and the systems underpinning them.

To ensure **consistency** of implementation, we now have in place a number of **networks** which meet regularly: Responsible Officers; Revalidation Managers and Professional Leads; Appraisal Leads; Appraisers.

#### CMO Visits to Independent Designated Bodies

The High Level RO for Wales, Dr Ruth Hussey has regular contact with NHS organisations across Wales and opportunity to raise issues around revalidation with the appropriate individuals throughout the year. The same opportunities for discussion with non-NHS organisations do not necessarily arise and as a result it may be difficult to obtain the level of assurance required to satisfy the Higher Level RO that the arrangements in place within these organisations are compliant, or whether organisations require any assistance to support the revalidation process in Wales. To ensure consistency, Dr Ruth Hussey has undertaken visits to each of the non-NHS organisations across Wales. The final visit will take place later this month. Following the conclusion of the visits, WG officials will provide WRDB members with an overview of the visits at the next WRDB meeting, due to take place on 19th March.

We have a new non-NHS Designated Body in Wales – Regis Healthcare (CAMHS).

#### c. Implementation principles including fairness and transparency

We have agreed a **tripartite statement on annual appraisal** between Welsh Government, BMA Wales Cymru and the Revalidation Support Unit (Wales Deanery). The statement reinforces the importance of annual appraisal and reminds employers and doctors of agreed good practice relating to appraisal and revalidation. The statement will be distributed to all doctors in Wales.

Existing processes for **ensuring engagement** with GP appraisal have been extended to encompass all doctors in Wales, ensuring that non-engagement is managed promptly and consistently.

We have commenced work collating guidance on appraisal and revalidation for **locum doctors**. This suite of guidance includes advice for those doctors on gathering the required supporting information and how to utilise the online system (MARS) effectively, and how to access appraisal arrangements in their current Designated Body.

d. Benefits to patients and patient safety

We continue to monitor and review the contract with Equiniti for delivery of **Multi Source Feedback**. To date 6386 doctors have been registered with the system and returns have been received from 96,908 patients.

In Wales doctors have an opportunity as part of their appraisal to identify and consider management of **constraints**, those factors which may be constraining their development or delivery of care. Anonymised reports are available to Designated Bodies on constraints identified within their area as well as for Wales as a whole. We have commenced a piece of work to analyse trends in constraint reporting, and to identify and encourage good practice in the use of this data which has the potential to inform organisational quality improvement processes.

e. Increasing the impact of revalidation

We remain keen to explore cross-UK reciprocal quality assurance and opportunities to share good practice.

We look forward to the Revalidation Support Unit's **publication** of their evaluation of the impact of revalidation on GP Appraisal in the March / April edition of *Education for Primary Care*. The Unit continues to lead for Wales the work to support the **UMBRELLA** evaluation of revalidation.

The Unit have also initiated an interesting project exploring the generic skills base of appraisers and the viability and acceptability of '**cross sector**' **appraisals** i.e. those across primary and secondary care.

f. Any other issues affecting delivery of revalidation

Dr Ruth Hussey, the Higher Level RO for Wales will retire later this month. Until Dr Hussey's replacement is appointed, Dr Chris Jones, Deputy Chief Medical Officer for Wales will act as the interim Higher Level RO for Wales.