Taking Revalidation Forward
Progress update - July 2018

This document highlights some of the key developments since the progress report we published in January 2018, on how we and the wider healthcare sector have been working together to address the recommendations in Sir Keith Pearson’s review of revalidation, Taking Revalidation Forward.

The work is organised into six work streams (outlined below), each one covering a priority area from Sir Keith Pearson’s report.

Delivery of the action plan is overseen by the Revalidation Oversight Group, which is chaired by our Chief Executive and includes key external revalidation stakeholders. The programme of work is due to complete in the autumn.

1. Making revalidation more accessible to patients and the public

Objectives

➢ Increase patient/public awareness of, and involvement in, revalidation

➢ Increase the impact of patient feedback on doctors’ practice

Key GMC highlights

➢ We have published and promoted materials that explain what revalidation is to patients and the public.

➢ We have developed and published two case studies that show how organisations can involve lay representatives in their local appraisal and revalidation processes and what the benefits are. We continue to seek further examples from other organisations.

➢ We have begun talking to stakeholders about how we might develop our patient feedback requirements for revalidation so that they work better for patients and doctors. We plan to consult on potential options for changes to the requirements in 2019.
Key highlights from our partners

- Commissioned by the Academy of Medical Royal Colleges, The Royal College of Physicians London published its [research on patient feedback](#), looking at benefits, challenges and recommendations for change. The report will be updated in December 2018 with new examples following a survey which will be conducted in September 2018.

- The Welsh government is working with Health Boards and the Community Health Council network to promote revalidation information in GP surgeries and hospitals.

2. Reducing burdens and improving the appraisal experience for doctors

Objectives

- Clarify evidence requirements of appraisal for revalidation

- Ensure appraisals support reflection and professional development as well as meeting revalidation criteria

- Ensure revalidation requirements are fully understood by doctors new to UK practice and those leaving training

Key GMC highlights

- We have revised and published our [guidance on supporting information for appraisal and revalidation](#) on our website. It is also available in [PDF format](#).

- We updated the format and content of our website to help doctors find revalidation information more easily. The website now includes a video, new tools and advice for specific groups of doctors, including a [suite of revalidation top tips for doctors](#).

- We have enhanced our [protocol for making revalidation recommendations](#) to make it more useful for responsible officers and suitable persons. We’ve also clarified advice on overseas evidence and local appraisal requirements.

- We have become a member of the Care Quality Commission’s Regulation of GP Programme Board and are contributing to discussions on streamlining local joint working, information sharing and agreeing consistent terminology with an aim of reducing regulatory burdens.
Key highlights from our partners

- The Academy of Medical Royal Colleges has published its own revised supporting information guidance framework and is working with royal colleges and faculties to consider any updates to local speciality guidance documents.
- NHS England has updated materials to raise awareness about appraisal requirements with responsible officers.
- The Revalidation Support Unit of the Wales Deanery is carrying out a programme of quality assurance visits to cover all designated bodies in Wales.
- Health Education England has published the findings from its Annual Review of Competence Progression process. It is now working with a range of stakeholders to implement the recommendations which include raising awareness of revalidation requirements for trainees.

3. Strengthening assurance where doctors work in multiple locations

Objectives

- Establish UK-wide principles to govern the sharing of information needed for a revalidation decision
- Clarify which locum agencies have designated body status
- Reinforce and promote the revalidation responsibilities of designated bodies in respect of doctors working in multiple settings

Key GMC highlights

- We have published new information sharing principles. They cover how organisations should share information about doctors’ practice to ensure that concerns relating to patient safety and public confidence are shared reliably and consistently across the healthcare system.
- Our website now has clearer advice on how designated bodies should support doctors with revalidation. We have published a checklist summarising their main responsibilities. This includes reference to supporting doctors with systems and information.
Key highlights from our partners

- NHS England has worked with the Care Quality Commission to update its guide for inspection teams with criteria to consider when inspecting organisations that engage with locums and doctors in short-term placements.

- NHS Employers is reviewing its guidance on the appointment and employment of NHS locum doctors to see where updates are required to make it more helpful. It will be published later this year.

4. Reducing the number of doctors without a connection

Objectives

- Increase the potential for doctors to make a stable and meaningful connection to a designated body
- Clarify advice for doctors on when a licence to practise is required
- Ensure the revalidation process is robust for doctors who remain without a connection

Key GMC highlights

- We’ve improved the advice and support we give doctors to help them identify potential connections. As part of this work we have expanded the online tool that helps doctors find their designated body. It now supports doctors to make a connection to a suitable person if appropriate. We have also improved processes and training for our Revalidation Team.

- We have published new and updated webpages for doctors and healthcare organisations to provide clearer information and advice about the licence to practise. We now have a licensing resources page which includes top tips addressing the common enquiries we receive, and a discussion list for doctors and healthcare organisations to use to support their conversations about whether a doctor needs a licence for the work they do.

- We have carried out a review of our suitable person scheme which found that the process is robust, works well and is helping doctors engage in revalidation. We plan to improve the support we offer suitable persons and develop an approach to quality assure the scheme.

Key highlights from our partners
The Department of Health is starting to review the responsible officer regulations, with a view to consulting on potential changes during 2019.

5. Tracking the impact of revalidation

Objective

➤ Develop a proportionate approach to tracking revalidation on an ongoing basis to ensure it continues to meet its objectives at a national and local level.

Key GMC highlights

➤ We have reviewed and reflected on learning from previous evaluations of revalidation.

➤ Supported by our partners we have developed a forward-looking framework for tracking revalidation over time. The framework includes a small number of ‘best practice’ measures for tracking core aspects of revalidation.

Key highlights from our partners

➤ The Independent Doctors Federation has completed a review of appraisal documentation to help identify the impact of revalidation on doctors working independently. It is now beginning to analyse the findings and aims to complete the report by autumn 2018.

6. Supporting improved local governance

Objectives

➤ Strengthen local governance processes, including board-level engagement, to improve the impact of revalidation on care and safety in healthcare organisations

➤ Ensure effective local processes are in place within designated bodies to assure fair and unbiased revalidation recommendations

Key GMC highlights

➤ We have been working with stakeholders to update the governance handbook, which provides guidance to designated bodies and others on ensuring their local governance systems for the management of doctors are robust and effective. The
revised handbook will be published in autumn 2018.

- We have developed new webpages explaining and signposting responsible officers to our data on revalidation. We continue to review what other information would be helpful to responsible officers in the future.

Key highlights from our partners

- NHS Improvements is carrying out a review of Never Events to understand what safety systems and wider clinical governance systems look like in outstanding NHS trusts.