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| <b>Agenda item:</b>  | <b>4.3</b>  |
| <b>Report title:</b> | <b>Revalidation progress update: Wales</b>  |
| <b>Report by:</b>    | <b>Geraldine Buckley, <a href="mailto:geraldine.buckley@wales.gsi.gov.uk">geraldine.buckley@wales.gsi.gov.uk</a></b><br><br>029 2082 6317 |
| <b>Action:</b>       | <b>To note</b>  |

## **Executive summary**

The attached 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 progress update.

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| <b>UK Revalidation Advisory Board Progress Update: Wales</b> |
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To facilitate reporting, we have structured this update in accordance with the Board's objectives.

a. Revalidation delivery progress

**Revalidation recommendations to end January 2017 (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 |
|--------------|---------------|---------------|-----------------------------|--|--|---|
| <b>Total</b> | <b>6,870</b>  | <b>6,492</b>  | <b>5,725</b>                | <b>708</b>   | <b>41</b>  | <b>18</b>                                   |
| <b>%</b>     |               | 94%           | 83%                         | 10%  | 1%   | 0.26%                                       |

**Appraisal completion figures 1 April 2016 – 31<sup>st</sup> March 2017**

| Designated Body | Prescribed Connections (from GMC) | Meetings Booked | Summaries Committed | Appraisals Completed (summary agreed) | Appraisal rate (based on appraisals completed) | Ext. Circumstances (Self-Reported) | Appraisal Rate 2016/17 including Exceptions |
|-----------------|-----------------------------------|-----------------|---------------------|---------------------------------------|--|------------------------------------|---|
| NHS             | 6842                              | 4559            | 4406                | 4281                                  | 63%  | 108                                | 63%   |
| Independent     | 9                                 | 6               | 6                   | 6                                     | 67%  | 0                                  | 67%   |

b. Integrity of the revalidation model

The pilot of **Revalidation Quality Assurance Visits** to Designated Bodies based on the NHS England Independent Verification model was completed in 2016. Two Designated Bodies were visited. The visits focus on the following areas:

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

The Unit are presently awaiting the report arising from the RSU Review, which will provide indication on whether the QA visits will remain under the Unit's remit, and if so, in what capacity.

The 2015-2016 full annual **Revalidation Progress Report (RPR)** (akin to the NHS England AOA process) has been sent to Welsh Government for their consideration. As the report for 2015-16 has followed a new format, Welsh Government are reviewing the full report before it is circulated. The report for the 2015-16 Appraisal Year combined the Quality Management Framework with the existing RPR to provide one complete data set. With some revisions, the RPR will continue to follow the amalgamated format for 2016/17, and the report template will be circulated to Designated Bodies in Spring 2017.

To ensure **consistency** of revalidation implementation, we continue to facilitate **networks** and meetings for: Responsible Officers; Revalidation Managers and Professional Leads; Appraisal Leads; Appraisers.

c. Implementation principles including fairness and transparency

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. Analysis of exceptions is now being included in our ongoing appraisal reporting processes, which facilitates transparency of the data. We also continue to support the Health Boards with Secondary Care appraisal exceptions, ensuring that they have appropriate policies and procedures in place.

We have produced a guidance document on appraisal and revalidation for **locum doctors**. This document will be taken to the March 17 WRDB meeting for review and approval. 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. WRDB has agreed that a) locum doctors should be able to access appraisal from whichever DB they are connected to when their appraisal is due (regardless of length of contract) and b) MARS is the preferred route to appraisal for all locum doctors, exceptions would have to be agreed with the RO.

d. Benefits to patients and patient safety

We continue to monitor and review the contract with Equiniti for delivery of **Multi Source Feedback** and await the latest report on feedback from patients. The contract for Equiniti will conclude in 2018, and we are consulting with Designated Bodies in Wales, via RAIG meetings and a survey, regarding how we should proceed with the upcoming tenders. We have the option to extend the Equiniti contract by 2 years, or commence a new contract with Equiniti or another provider for 5 years.

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. We are nearing completion of a project run jointly with the RSU and Hywel Dda 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. This project report will be available in April 2017.

e. Increasing the impact of revalidation

The Unit have written a paper on Appraisal Insight Monitoring (AIMs), which is an internal system adopted by the Unit to track and manage Significant Events raised in the GP Appraisal Process. The paper highlights the benefits of the AIM process in a multidisciplinary setting, and maps to the Significant Event process. The Unit intend for the paper to be published in Spring/Summer 2017.

The Revalidation Support Unit's **publication** of their evaluation of the impact of revalidation on GP Appraisal was included 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 and welcomed the recent publication of the interim report.

The Unit has also undertaken an extended project looking at Cross Sector and distance appraisals. This project is an extension of the pilot project looking at the reciprocal appraisals of two Cross Sector Appraisal Coordinators/Leads. The report for the project will be circulated in April 2017.

f. Any other issues affecting delivery of revalidation

We are awaiting the full report of the review led by Dr Heather Payne, on the role and remit of the Revalidation Support Unit (RSU) in Wales.