

Trust Board Report

Meeting Date:	22 July 2013
Title:	Revalidation of Medical Staff – Quarterly Update
Executive Summary:	<p>This report describes the progress of the Trust towards the management of medical appraisal & revalidation since the last Trust Board Report in May 2013.</p> <p>Summary of key points;</p> <ul style="list-style-type: none"> • As at 20 May 2013, the GMC revalidated 6,573 doctors. • As at 01 July 2013, the Trust’s Responsible Officer made positive recommendations for 15 doctors, all have been approved by the GMC. • As at 30 June 2013, the Trust’s Medical Appraisal compliance was 82.2%.
Action Requested:	None – for information/assurance.
Report of:	Medical Director
Author: Contact Details:	Zoe Marsh Tel 6183 Email: zoe.marsh@nhs.net
Resource Implications:	None
Public or Private: (with reasons if private)	Public Session
References: (eg from/to other committees)	Revalidation Steering Group
Appendices/ References/	
NHS Constitution: (How it impacts on any decision-making)	<p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> ✦ Equality of treatment and access to services ✦ High standards of excellence and professionalism ✦ Service user preferences ✦ Cross community working ✦ Best Value ✦ Accountability through local influence and scrutiny

BACKGROUND DETAILS

1. BACKGROUND

1.1. On October 19th 2012, the Secretary of State for Health formally announced the introduction of medical revalidation with effect from 03 December 2012.

1.2. 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. Revalidation aims to give extra confidence to patients that their doctor is being regularly checked by their employer and the GMC.¹

2. NATIONAL UPDATE

2.1. Since 03 December 2012 the GMC has:

- revalidated 6,573 doctors
- deferred 643 doctors' revalidation
- received 18 notifications of early concerns

2.2. Figure 1 provides a summary of UK recommendation submissions as at 20 May 2013.

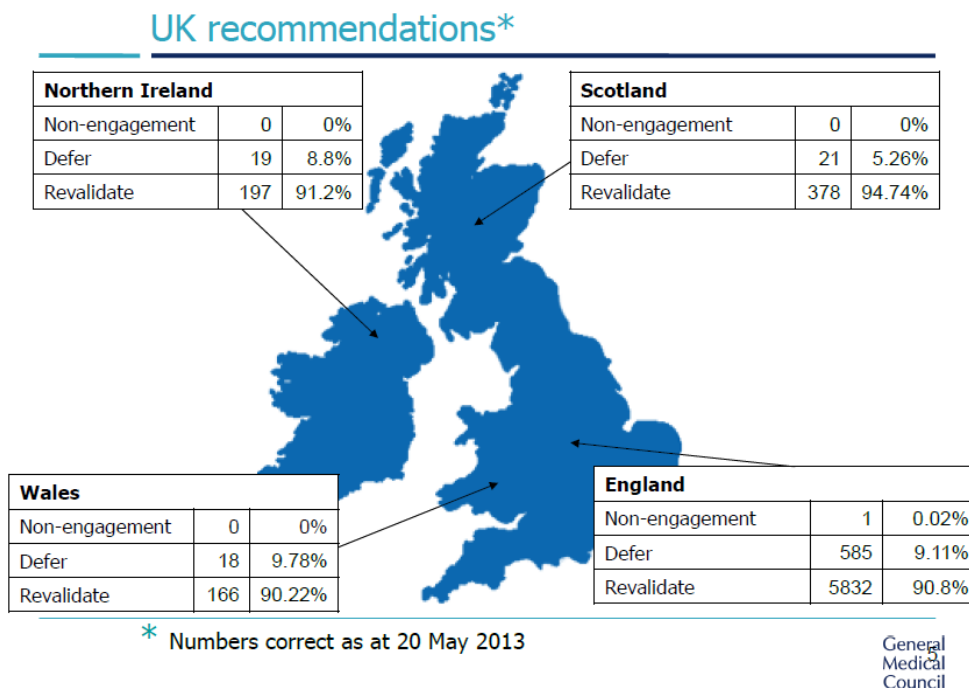


Figure 1: UK Recommendations

3. LOCAL UPDATE

3.1. The first revalidation cycle started January 2013 and ends March 2016. During this period, all doctors to whom The Royal Wolverhampton NHS Trust is the designated body will have a recommendation made about their fitness to practice to the GMC by the Trust's Responsible Officer.

¹ GMC Revalidation - www.gmc-uk.org

3.2. At 01 July 2013, 331 doctors had a prescribed connection to RWT.

- 24.2% (80) require a recommendation during Year 1
- 34.1% (113) during Year 2,
- 38.7 % (128) during Year 3,
- 0.9 % (3) during Year 4, and
- 2.1 % (7) during Year 5.

3.3. Tables 1 & 2 below show the position of recommendations, submitted to the GMC by the Trust's Responsible Officer. The GMC has approved all recommendations, meaning at 01 July 2013, 4.5% (15) doctors with a prescribed connection to RWT have been revalidated.

Table 1: Year 1, Quarter 1, April 2013 – June 2013

Number of doctors with a submission date during Y1, Q1	Revalidate	Defer	Non-engagement	TOTAL
7	7	0	0	7

Table 2: Year 1, Quarter 2, July 2013 – September 2013

Number of doctors with a submission date during July of Y1, Q2	Revalidate	Defer	Non-engagement	TOTAL
8	8	0	0	8

4. APPRAISAL COMPLIANCE

4.1. Medical appraisal underpins the revalidation process. Doctors are required to have 5 annual appraisals within the Revalidation Cycle of five years.

4.2. Table 3 shows the Trust's medical appraisal compliance at 30 June 2013 with national comparison.

Table 3: Trust's Medical Appraisal Compliance at 30 June 2013

Staff Group	TRUST % COMPLIANCE	NATIONAL AVERAGE
Consultants	82.5%	75%
Non-training grades	80.9%	50%
TRUST TOTAL	82.2%	

4.3. Non-engagement criteria are currently being drafted to specifically identify doctors not engaging in the appraisal process and will define the point at which a notification of non-engagement will be sent to the GMC.

5. CONCLUSION

5.1 The Trust has made good progress to ensure the appropriate infrastructure is in place to support revalidation. This will be further enhanced with the appointment of the Associate Medical Director for Revalidation and Professional Issues.