

EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST

REPORT TO:	BOARD OF DIRECTORS MEETING
DATE:	28 NOVEMBER 2014
SUBJECT:	MEDICAL REVALIDATION
REPORT FROM:	MEDICAL DIRECTOR
PURPOSE:	IIINFORMATION DISCUSSION
CONTEXT / REVIEW HISTORY / STAKEHOLDER ENGAGEMENT The Responsible Officer is required to provide a regular report to the Trust board on progress with medical appraisal and revalidation.	
SUMMARY: Revalidation of doctors by the General Medical Council (GMC) commenced in December 2012. This report is an overview of the processes to support the Responsible Officer in providing the required assurance thus discharging statutory responsibilities for the period 01/04/2014 – 30/09/2014.	
RECOMMENDATIONS: The Board is asked to note the progress and discuss the report.	
NEXT STEPS: The Board will receive a further update on these areas in January 2015.	
IMPACT ON TRUST'S STRATEGIC OBJECTIVES: All objectives depend upon an appropriately licensed and revalidated medical workforce.	
LINKS TO BOARD ASSURANCE FRAMEWORK: AO10: Maintain strong governance structures and respond to external regulatory reports and guidance.	
IDENTIFIED RISKS AND RISK MANAGEMENT ACTIONS: N/A	

FINANCIAL AND RESOURCE IMPLICATIONS: Financial strategy dependent on same medical workforce.
LEGAL IMPLICATIONS / IMPACT ON THE PUBLIC SECTOR EQUALITY DUTY: The RO is legally responsible to Parliament to ensure effective processes are in place to enable licensed doctors to apply for revalidation every 5 years
PROFESSIONAL ADVICE TAKEN ON ANY NOVEL OR CONTENTIOUS ISSUES: Support from the RST, GMC and NHS England.
ACTION REQUIRED: (a) To note (b) Discuss and agree recommendations as appropriate
CONSEQUENCES OF NOT TAKING ACTION: N/A

MEDICAL REVALIDATION – APRIL TO SEPTEMBER 2014

1. Executive summary

Successful annual appraisal is a pre-requisite of a doctor's license to practice. Trusts must be assured that their medical workforce prepares for successful revalidation and has systems and policies in place which mitigate risks in this process.

As at 30th of September 2014, the number of doctors with whom EKHUFT has a prescribed connection is 476.

- Substantive consultants: 332
- Substantive associate specialists or specialty doctors: 109
- Temporary or short term contact holders: 35

2. Purpose of the Paper

This report seeks to inform the Board of Directors of appraisals' progress and medical revalidation between April and September 2014. The Board is asked to note the report, discuss and determine actions as appropriate.

3. Background

Licensing of medical practitioners took place in October 2009. Revalidation was introduced to EKHUFT in December 2012 with 20% of consultants and SAS doctors nominated for revalidation in the first year. EKHUFT introduced an e-Portfolio system (PReP) from Premier IT available to all consultants and SAS doctors from August 2012.

114 consultants and 13 SAS doctors were trained in an accredited, 'strengthened appraisal' training programme. An additional 14 doctors will be trained on the 3rd of December 2014.

In addition the Appraisal Lead, Dr Neil Martin, supported by Professor Kim Manley, has held 9 half day coaching sessions for trained medical appraisers (3 in 2013 and 6 in 2014). These sessions are part of quality assurance and link medical appraisal to other systems of appraisal within EKHUFT for non-medical staff and the 'We Care Programme'.

The Pilgrims Hospice and EKHUFT signed a service level agreement to provide revalidation recommendations for the 7 doctors employed by the hospice although only 5 remain with a prescribed connection to that organisation.

A Revalidation Working Group, chaired by the RO was set up in January 2012 and meets regularly.

The RO has previously updated the Board of Directors on progress with medical revalidation. The first report was submitted in July 2012 with further updates in February 2013 and October 2013. Full report for year 2013-2014 was submitted in June 2014 with further update in August 2014.

4. Medical Appraisal

Appraisal rates for the 1st quarter (April – June) and 2nd quarter (July – September) are highlighted below:

Appraisal rates	1 st quarter	2 nd quarter
Due in this period	90	90
Completed	55	70
Not completed	35	20
Booked for the next period	16	4
Not booked at all	19	16
Total number of doctors	478	476

The circumstances of doctors who did not complete their annual appraisal within their due period will be individually reviewed and addressed with them. If necessary this will be escalated to the GMC as non-engagement with the process of revalidation.

5. Revalidation Recommendations

The following recommendations have been made by RO for the 1st quarter (April – June) and 2nd quarter (July – September) are highlighted below:

Recommendations	1 st quarter	2 nd quarter
Positive	26	59
Deferrals	5	8
Non Engagement	0	0
Missed or late	0	0
Total	31	67

6. Responding to Concerns and Remediation

Where concerns are raised about any doctors' performance they will be dealt with appropriate HR processes under the overarching policy of Maintaining High Professional Standards. The Trust's approach to remediation is laid out in the Remediation Policy. The details for 1st quarter (April – June) and 2nd quarter (July – September) are highlighted below:

Concerns about a doctor's practice (as the primary category)	
Number of doctors with concerns about their practice	9
Capability concerns	3
Conduct concerns	5
Health concerns	1
Total	18

Remediation/Reskilling/Retraining/Rehabilitation	
Consultants	1
Staff grade, associate specialist, specialty doctor	0
Temporary or short-term contract holders	0
Other	0
Total	1

Local Actions/Interventions	
Number of doctors who were suspended/excluded from	0
Number of doctors who have had local restrictions placed on their practice	2
Total	2

GMC Actions	
Referred to the GMC	1
Underwent or are currently undergoing GMC Fitness to Practice procedures	9
Had conditions placed on their practice or undertakings agreed with the GMC	1
Had their registration/licence suspended by the GMC	0
Were erased from the GMC register	0
Total	11

National Clinical Assessment service actions	
For new advice or on-going discussion	17
For investigation	0
For assessment	1
Number of NCAS investigations performed	0
Number of NCAS assessments performed	0
Total	18