

TO:

**All Secondary Care Doctors**

**NHS Lothian**

Date 02 September 2013  
Your Ref  
Our Ref DIMF/ED/MM  
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Dear Colleague,

### Relicensing and Revalidation in Secondary Care

Relicensing and revalidation of doctors by the General Medical Council (GMC) has now started.

In order to be relicensed you will need to

1. Be participating in an **annual** appraisal process that is based on Good Medical Practice and covers all aspects of your practice. The requirement for annual appraisal applies even if you have recently been relicensed.
2. Demonstrate through appraisal that you have collected and reflected on evidence of the following, in line with the GMC Guidance *Supporting Information for Appraisal and Revalidation*
  - Continuing Professional Development (CPD)
  - Quality improvement activity
  - Significant event analysis
  - Review of complaints and compliments
  - Feedback from colleagues i.e. have taken a multisource feedback (MSF) within the last five years.
  - Feedback from patients, in most cases by means of questionnaires obtained within the last five years.

The key thing is to be undergoing an annual appraisal with the output being a typed comprehensive Form 4 and personal development plan (PDP) that demonstrate adequate and appropriate CPD, quality improvement/patient safety activity, reflection on critical/significant events and complaints (if any) and multisource feedback. Appraisers should now be allocated by the Clinical Director or other appropriate medical manager. It is no longer appropriate for a doctor to try and arrange their own appraiser. The right to decline one nominated appraiser remains.

### Supporting Evidence

As part of the appraisal process doctors need to present and discuss all complaints and incidents involving them. We have recently introduced a process to provide individual reports to each doctor on complaints and incidents involving them.

The GMC does not mandate any particular MSF instrument. The easiest to access is one developed by NHS Education for Scotland available on the website of the Scottish Online Appraisal Resource (SOAR) (see link below). Others are also available including one developed by the GMC which is available on their website. Ideally you should take an MSF before appraisal so the feedback can be discussed at appraisal and inform the PDP if appropriate.

Patient questionnaires should cover the whole scope of your practice. The range of patients providing feedback should reflect the range of patients that you see. Doctors who do not see patients or cannot collect feedback from patients, relatives or carers should discuss this (as well as any alternative ways to engage with patients) with their appraiser. Current guidance from the GMC is that it would not be appropriate for the employer to list specialties that do not need to provide patient questionnaires. Instead a decision that patient questionnaires are not necessary should be made in the context of an individual discussion between the doctor and their appraiser based on that individual's practice.

A number of patient questionnaires are available including the GMC's own questionnaire, the generic CARE questionnaire (which are both available of the appraisal page of the Intranet), tailored patient questionnaires developed by colleges and specialist societies and a number of commercially available questionnaires. NHS Lothian also provides a patient questionnaire package from a company called Edgecumbe Consulting for those who wish to use it. The contact for accessing this is [sandy.mackenzie@luht.scot.nhs.uk](mailto:sandy.mackenzie@luht.scot.nhs.uk).

The GMC does not prescribe the number of patient responses you are required to collect and recommend that you check with your employer or questionnaire provider, as each questionnaire will have been piloted to determine the appropriate number of respondents required to provide a meaningful picture of your practice. If you use the GMC questionnaire, there is guidance available on the GMC website.

**Scottish Online Appraisal Resource** (<http://seccare.appraisal.nes.scot.nhs.uk/>).

The Scottish Online Appraisal Resource (SOAR) allows the appraisal forms to be completed and made available to your appraiser on-line. We strongly recommend that you use this facility for your next appraisal. It makes the process of exchanging information with your appraiser straightforward, facilitates the exchange and review of a draft Form 4, allows electronic sign off of the final agreed version of the Form 4 and ensures that your Form 4 reaches the Responsible Officer automatically. It now has a facility to log two appraisers for joint academic appraisals by the NHS and University. Sandy Mackenzie [sandy.mackenzie@luht.scot.nhs.uk](mailto:sandy.mackenzie@luht.scot.nhs.uk) can provide a log in for SOAR.

### **Undergraduate and Postgraduate Training roles**

The GMC will soon require formal recognition for doctors with the roles of named educational supervisor in postgraduate training, named clinical supervisor in postgraduate training, lead coordinator for undergraduate training in Local Education Providers and doctors responsible for overseeing students educational progress in a medical school. For those with those roles, Personal Development Plans should now include a specific objective on how and when they will achieve this recognition.

### **Health Care Acquired Infection**

For some years we have required doctors to provide evidence in their appraisal of CPD in the prevention and management of health care acquired infection. This requirement remains and for many of us the easiest way to do this will be to make use of the modules on LearnPro NHS (<https://nhs.learnpro.com>).

### **Safer Blood Transfusion**

We also require evidence of CPD and safer blood transfusion for those who are involved with blood transfusion in any way. Again for many of us the easiest way to access relevant CPD is to use LearnPro NHS. For those who are never involved in blood transfusion there is a desist form on the appraisal site on the NHS Lothian Intranet which should be submitted in place of CPD in Safer Blood Transfusion.

### **Timing of appraisals**


The traditional rush of appraisals in the last few months of the year is no longer tenable. The workload of both appraisers and appraisees associated with appraisal now that relicensing has started has increased and I have asked the Clinical Director's to start to spread appraisals throughout the calendar year in a more even fashion. We will also move to a situation where fewer appraisers do more appraisals with time in the job plan for this.

We will update you as further developments occur. The links below give further information:

<http://www.gmc-uk.org/doctors/revalidation.asp>

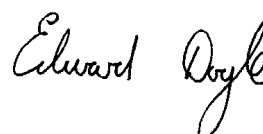
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Yours sincerely,



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