Trainee Revalidation
What it will mean for you
May 2012 Issue 1

What is revalidation?
Revalidation is the process by which doctors will demonstrate to the GMC that they are up to date, fit to practise and complying with the relevant professional standards.

How will revalidation work in general?
Each licensed doctor will link to the GMC through a senior licensed doctor in their organisation (designated body) called the Responsible Officer.

Doctors are expected to maintain portfolios of supporting information which are reviewed at annual appraisals. The Responsible Officer will use this evidence to make a recommendation to the GMC about a doctor’s fitness to practise and then the GMC will decide whether a doctor’s licence should continue for another 5 years (be revalidated).

There are 6 types of supporting information that doctors will be expected to provide in their portfolios and discuss in their annual appraisals at least once in each five year cycle:

1. Continuing Professional Development
2. Quality Improvement Activity
3. Significant Events
4. Feedback from Colleagues
5. Feedback from Patients (where applicable)
6. Review of Complaints and Compliments

What does this mean for trainees?
For you the revalidation process begins on full registration (F2 for UK trainees) and then you are revalidated at CCT and for longer training programmes after 5 years in addition to at CCT.

While you are a Wessex Deanery trainee:

- Wessex Deanery is your Designated Body.
- Dr Simon Plint, as the Postgraduate Dean is your Responsible Officer.

You will already maintain much of the supporting information required for revalidation in an ARCP portfolio. For example, quality improvement activity is evidenced by participation in audit and feedback from colleagues through multi-source feedback requirements in training.

Although information and reflections on significant events, complaints and compliments may be included in your portfolio, it is not currently a requirement across all specialties. Therefore to comply with revalidation regulations all trainees will need to start collecting and including this information in their portfolios.

For the Dean as Responsible Officer to make a revalidation recommendation he needs to take into account the complete scope of your practice. Therefore for revalidation, you will be required to declare any extra work you may do outside of training in your capacity as a doctor, either as a locum, in private practice or in a voluntary role.

The process for trainees is still under review and development and we will make sure to keep you informed. Please keep an eye on the Wessex Deanery website for the latest developments.

In a nutshell
The revalidation process for trainees will be via the existing ARCP process with a little additional information from employers about clinical governance and information from trainees about their scope of practice.
Summer Roll-out
We are currently in discussion with some specialties over implementing part of the revalidation process for the summer ARCPs. This may mean that some trainees are asked to include additional information in their training portfolios; for example a Reflection on Extra Work done outside of Training form.

We will be contacting you with more information about this roll out and the process in general over the next couple of months.

Systems Assessment
Wessex Deanery has been selected to participate in a Systems Assessment Project run by the RST. This is not a pilot, but is instead a ‘fly on the wall’ observation of how we are implementing the process, noting the particular challenges we might face and if necessary raising these at a national level.

As part of this project the RST may ask for some feedback from any of you who have been involved in the enhanced ARCPs.

Website
We are also working on improving the Trainee Revalidation section of the website so that it will contain all the relevant information, necessary forms and a list of answers to frequently asked questions. If you have ideas for questions which you would like answers for on the website then please email them to alethea.peters@wessexdeanery.nhs.uk

Doctors in Training Revalidation Pilot
To investigate the possibility of enhancing the current ARCP process to include information about outstanding complaints, significant events or clinical governance issues, Wessex Deanery participated in the English Doctors in Training Revalidation Pilot.

The pilot ran from October to December 2011 and was managed on behalf of the English Deaneries by the Kent, Surrey and Sussex (KSS) Deanery in conjunction with the Revalidation Support Team (RST).

22 of the 126 participants nationally came from Wessex so a big thank you to everyone who participated!

The final report, complete with the national steering group recommendations, was submitted to the RST at the end of February and we will be sharing the recommendations with you shortly.

Next Steps
The GMC have just begun their ‘Making your connection’ campaign, where they are asking all doctors to confirm the organisation which will support their revalidation, their ‘designated body’.

The GMC will be using your response to the 2012 National Training Survey to establish your designated body, which for you is Wessex Deanery. The Survey is open from 30th April to 15th June 2012.

The GMC will then contact you in the autumn, asking you to visit GMC-Online to confirm that the information they hold about you is correct.

“The revalidation is something the public expect their doctors to undertake and, if implemented sensitively and effectively, is something that will support all doctors in their innate professional desire to improve their practice still further.”
Rt Hon Andrew Lansley, Secretary of State for Health—June 2010
National Milestones

This is the current expected timetable for implementation of revalidation:

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<tr>
<th>Timeframe</th>
<th>Description</th>
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<tbody>
<tr>
<td>April/May 2012</td>
<td>All organisations who employ doctors are currently undertaking an Organisational Readiness Self-Assessment (ORSA) exercise on their state of readiness for revalidation</td>
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<tr>
<td>Mid 2012</td>
<td>The results of the ORSAs contribute to the Secretary of State’s assessment of readiness for revalidation</td>
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<tr>
<td>Late 2012</td>
<td>‘Go live’ decision is made and revalidation legislation is enabled</td>
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<tr>
<td>Late 2012/Early 2013</td>
<td>First revalidation recommendations are made and first doctors are revalidated</td>
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<tr>
<td>April 2013—March 2014</td>
<td>First full year where it is expected that 20% of doctors will be revalidated</td>
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<td>April 2014—March 2016</td>
<td>It is expected that over the next two years all remaining doctors will be revalidated</td>
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Roll-out plans for trainee doctors are still being established and when more information is available we will let you know.

“Now that late 2012 has been set as the date of implementation, we look to the GMC to ensure that there are no further delays and that the current target date is achieved”
Rt Hon Stephen Dorrell, Health Committee Revalidation of Doctors—Feb 2011

Who’s who

Alethea Peters
Alethea originally started as the Revalidation Project Officer running the Doctors in Training Revalidation Pilot and she is now working closely with Mark to implement the trainee revalidation process at the Deanery.

She is the main point of contact for revalidation at the Deanery, so if you have any queries then please contact her on: alethea.peters@wessexdeanery.nhs.uk

Mr Mark Goodwin
As the Associate Dean for Revalidation, Mark is leading on implementing trainee revalidation at the Deanery.

Dr Simon Plint
As the Postgraduate Dean, Simon is the Responsible Officer (RO) for all trainees in Wessex.

Useful Links

GMC Website: http://www.gmc-uk.org/doctors/12383.asp
RST Website: http://www.revalidationsupport.nhs.uk/index.php
Deanery Website: http://www.wessexdeanery.nhs.uk/trainee_revalidation.aspx