# Minutes of the Revalidation Delivery Board Friday 28<sup>th</sup> June 2013, 9:30am, Room C3.18, Castle Buildings

#### Present

Dr Paddy Woods, Chair Jon Billings Alan Walker Dr David Stewart Professor Keith Gardiner Melanie Stevenson Cathy McCook Dr Claire Loughrey Joanne Donnelly Jane Lindsay

Irene Wilkinson

## **Apologies**

**David Bingham** 

Joyce Cairns
Dr Michael Mannion
Elaine Tait
Dr Steve Austin
Dr Gordon Kennedy
Dr Paul Darragh
Linda Kelly ( Acting Dir Nursing SET)
Joe Brogan
Dr Tony Stevens
Dr Kathryn Booth

## 1. Welcome and apologies

Dr Woods welcomed everyone to the meeting including Melanie Stevenson, GMC, shadowing Alan Walker, and Joanne Donnelly, GMC, observing as part of her induction. Cathy McCook deputised for Dr Stevens. Apologies were noted.

## 2 Agree minutes of last meeting held 14 March 2013

Alan Walker advised that he had attended the meeting. This would be amended. The minutes were agreed.

Action: I Wilkinson to amend minutes to note A Walker's attendance. Completed 28/6/03

## 3 Matters arising:

#### Revised RO Guidance - to be agreed.

Jane sought views from members on the revised RO Guidance that had been amended following feedback from RDB members and responsible officers. Comments were as follows:

- i highlight that the designated body for all trainees is NIMDTA;
- ii revise last box, page 19;
- iii link to GMC LTP regulations and guidance for doctors;
- iv check all hyperlinks functioning
- iv amend numbering of paragraphs 46-49.

Members agreed the guidance. It was noted that this would be discussed at the RO Forum meeting to be held 3 July 2013 and the guidance would then be available on the Departmental website.

Action: Jane Lindsay to make suggested amendments. Completed 10/7/13

 Updating lists of prescribed connections- interoperability with GMC and Regional HR IT systems.

Alan Walker said that no response had been received to date.

Action: Alan Walker to advise position

 To whom the GMC will escalate receipt of late RO recommendations (CEX or RO's RO)

No resolution to date.

Action: GMC to advise position before RO meeting 3 July 2013

Managing concerns survey.

Jane said that 75% of responses to the survey had been received. These will inform a remediation policy for N.I. The draft of this document should be available for comment by the end of summer.

 Doctors practising in private healthcare clinics alongside substantive HSC post/contract.

It was noted that more clarity regarding this issue had been included in the RO Guidance, and that the Department had recently issued correspondence to an independent healthcare facility in relation to this issue.

## 4 Update from GMC/Revalidation Regulatory Benefits – Jon Billings

Jon Billings advised that to date 10,000 doctors had been revalidated and 1,200 recommendations deferred. At present the numbers are too low to draw any substantial conclusions in respect of projecting future deferral/ non-engagement recommendations. From 30 received non-engagement notifications, one had proceeded to a formal process. Jon noted the value of the employer liaison role in supporting ROs in the revalidation decision making process.

The *Suitable Person* concept continues to be utilised and work is ongoing to define the evaluation of fitness to practise process for doctors with no connection to an RO or *Suitable Person*. Jon advised that the GMC would liaise directly with those doctors who have yet to respond to requests for information from the GMC; there are regulatory provisions to take appropriate action to protect patients if these doctors continue on this course. It was noted that over half of doctors who have not responded to date have an overseas registered address.

Jon also outlined the amendments being made to the Medical Act to strengthen the GMC's ability to ensure all doctors have a sufficient knowledge of the English language. Consultation on these changes would commence in the summer with the intention of coming into operation in April 2014. It was noted that legislative consent would be required from the N.I Assembly.

Prof .Gardiner queried the number of deferrals which related to doctors in training due to the need to link the date of revalidation to completion of CCT. He also advised that further issues for trainees in relation to their revalidation date include career breaks, maternity leave and subsequent extensions to the training period. Jon Billings undertook to raise this with GMC colleagues and Joanne Donnelly said that she would discuss further with Prof. Gardiner.

#### Action: Jon Billings and Joanne Donnelly

Jon then gave a presentation on the GMC's Revalidation Evaluation Framework; highlighting the key regulatory processes that revalidation will impact upon. Jon noted that revalidation is designed to drive the GMC's statutory purpose; to protect, promote and maintain the health and safety of the public by ensuring proper standards in the practice of medicine.

Jon outlined the desired system characteristics as follows:

- Clarity and rigour (e.g. recommendation statements)
- Builds on existing requirements where possible (e.g. appraisal)
- Driving universal participation (e.g. non-engagement)
- Flexibility/pragmatism (e.g. deferral)
- Transparency (e.g. RO protocol; decision-maker's guidance)

Members agreed that further discussion was needed on how to progress the public visibility of revalidation. Dr Woods thanked Jon Billings for his detailed presentation.

## 5 Revised GP appraisal documentation

Dr Loughrey advised that for the past number of months, NIMDTA have been developing new GP appraisal documentation to support revalidation. It has been agreed with the HSCB RO that that both the revised and extant documentation could be used for this appraisal year but that only the revised documentation will be used from next year onwards. Dr Woods said that these would be available on the Department's website.

## Action- Dr Loughery to forward final documentation for inclusion on DHSSPS website

## 6 Revalidation Implementation Issues

It was noted that there had been no additional revalidation implementation issues raised. Following a query in relation to an online medical appraisal system, Dr Woods advised that he and the CMO would be meeting with the Chief Executive of NHS Education for Scotland (NES) soon and that he would raise access to SOAR then.

## 7 Update on non medical revalidation

Jane outlined the revalidation options currently being considered by the Nursing and Midwifery Council and advised of the strategic drivers now in place to ensure a revalidation model is agreed by September 2013. The NMC anticipate that revalidation for nurses and midwives will begin in 2015.

## 8 Date of next meeting:

The meeting scheduled for Friday 6<sup>th</sup> September has been cancelled.

The date of the next meeting will therefore be Friday 25<sup>th</sup> October at 9:30am in Room C3.18, Castle Buildings, Belfast.

#### 9. Any Other Business

There being no other business Dr Woods thanked members for their participation and closed the meeting.