South Eastern Health and Social Care Trust

Paper No. SET/ 73 /2023	
Trust Board Date: 30 August 2023	
Public Agenda	

Title of Paper: Annual Report Medical Appraisal & Revalidation		
Please delete below as appropriate		
For Approval A document requiring Board Members majority decision prior to implementation or action.	~~**For Discussion**~~ ~~A document requiring Board Members consideration and debate.~~	~~**For Noting**~~ ~~A document that contains information regarding issues of which requiring Board Members should be made aware.~~

1.0 Background

This is an overview report to provide assurance to the Trust Board that the arrangements for Medical Appraisal and Revalidation have been operating effectively. This report forms part of the Medical Director's duties as a Responsible Officer (RO) and covers the calendar years January to December 2021. The appraisal cycle covering the calendar year for 2022 is ongoing.

Medical Revalidation was introduced by the General Medical Council (GMC) in 2012 to strengthen the way in which doctors are regulated, with the aim of improving the quality of patient care, patient safety and increasing public trust and confidence in the medical profession. The process involves a five yearly cycle of annual appraisals, with both patient and peer feedback, to support the Responsible Officer (RO), in making a recommendation to the GMC regarding a Doctors fitness to retain a licence to practice. All doctors with a licence to practice are required to participate in the process and the GMC allocates each doctor to a designated body which oversees the local appraisal process. The number of doctors for whom the South Eastern H&SC Trust acts as a designated body is currently 433, although this varies throughout the year.

2.0 Key Issues

2.1 During March 2020, the GMC suspended the revalidation and appraisal process in recognition of the impact of the pandemic on a doctor's ability to prepare for appraisal and revalidation.

2.2 Several challenges exist regarding the process. These relate to:

- Ensuring continued engagement of all medical staff.
- Encouragement of medical staff to undertake the role of an appraiser.
- Ongoing development of the qualitative assurance aspects of the process.

- Working regionally to ensure there is comprehensive information with regard to quality assurance of locum staff (at all grades) within the Trust.

2.3 Future OMD Focus and Aims

- Mutual engagement in a constructive appraisal process, we believe will improve patient care and ultimately lead to sustainability of the appraisal process.
- Greater emphasis within the process towards a supportive and learning culture where quality is recognised and lessons are learned.
- Continue to develop a process that identifies doctors in difficulty before there is a potential negative impact on patient care.
- To work with the region to ensure a consistent and robust quality assurance process.

3.0 Resources Implications (inc Organisational, Financial, Human Resources)

N/A

4.0 Impact on Safety, Quality and Experience (SQE)

Appraisal is recognised within the Trust as a process of continuous improvement. The ultimate aim is to ensure patient safety and to improve patient care. We believe implementation of a robust appraisal process will achieve these aims. Furthermore, if undertaken within a constructive learning environment, for the appraisees in particular, it will improve the working environment for the medical staff and as a consequence also improve the patient experience.

5.0 Key Risks and Proposals to Mitigate

Currently within the requirements of the appraisal process, ongoing refinement will be required in the light of recommendations from the Independent Neurology Inquiry and potentially the Urology Inquiry. The implications of these changes for appraisal in particular will be determined following an appropriate regional review. The Trust is currently engaging with the regional review process.

Lead Director: Mr Charlie Martyn

Date: 24/08/2023