

Board of Directors Meeting

Subject: Medical Appraisal and Revalidation Annual Report
Date: April 2015
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Lead Director: Andy Haynes, Executive Medical Director

Executive Summary This Report updates the Board on our quarterly progress in relation to appraisal and revalidation.
Recommendation The Board are asked to note the contents of the report.

Relevant Strategic Objectives (please mark in bold)	
To consistently deliver safe, effective high quality care achieving a positive staff and patient experience	To eliminate the variability of access to and outcomes from our acute and community services
To reduce demand on hospital services and deliver care closer to home	To develop extended clinical networks that benefit the patients we serve
To provide efficient and cost effective services and deliver better value healthcare	

Links to the BAF and Corporate Risk Register	Strategy items impact on all strategic objectives
Details of additional risks associated with this paper (may include CQC Essential Standards, NHSLA, NHS Constitution)	None compliance would result in a break of our GMC requirements
Links to NHS Constitution	4b – Staff – your responsibilities
Financial Implications/Impact	None
Legal Implications/Impact	None
Partnership working & Public Engagement Implications/Impact	None
Committees/groups where this item has been presented before	None
Monitoring and Review	Quarterly & Annual reporting to Board. Regular monitoring and reporting to Medical Director. Implementation of actions by Medical Director's Office Manager and Responsible Officer.
Is a QIA required/been completed? If yes provide brief details	No

MEDICAL APPRAISAL & REVALIDATION
Quarterly Report – January-April 2015

This Report updates the Board on recent developments in revalidation both locally and nationally. It also details the current position of our appraisal uptake.

1. Appraisal Rates

Appraisal rates for the period January 2015-March 2015 are as follows

Number of doctors which are connected to the designated body of Sherwood Forest Hospitals NHS FT	234
Number of appraisals due January 15-March 15	77
Number of appraisals that took place in this reporting period	59
Number of appraisal for which an agreed postponement was agreed	6
Number of appraisal for which a postponement was not agreed	12

Board members should note that the reason for postponement is a combination of sick leave, maternity leave and retire and return. For the 12 late appraisals that we are reporting this month, their appraisals are in progress.

The Trust is currently **95% compliant** with Medical Appraisal. This is a decrease of 3% since our last report.

2. Revalidation

As of the 31st March 2015, there are currently **234** doctors under the designated responsibility of Sherwood Forest Hospitals.

Revalidation for Quarter is as follows:

	Doctors due for revalidation	Number of Doctors successfully revalidated	Number of doctors who have been deferred
January 2015	4	2	2
February 2015	11	10	1
March 2015	16	14	2

From January 2015 to March 2015 we have deferred revalidation for 5 of our doctors. The reason for deferral is due to insufficient evidence to make a positive recommendation. These deferrals have been recorded in the revalidation action plan. The doctor is made aware of the actions required to obtain a positive recommendation for revalidation.

3. Appraisers

We have recently introduced an online survey to capture the results of appraisee feedback. The survey comprises of 10 questions and gives the appraisee an opportunity to feed back their experience of their appraisal. This feedback is anonymised, analysed and shared at the Appraiser Forum. This gives us great insight into what areas can be improved on year on year.

One of the improvements that we have made is the clinician's access to supporting information. The clinicians have moved from receiving little or no information about their activity, complaints/compliments and incidents, to receiving all of this information automatically 4 weeks prior to their appraisal date.

At the last Appraiser Forum we have taken our Appraisers through the Appraiser Self-Competency Assessment which is part of the Framework for Quality Assurance. This asks our Appraisers to rate themselves from 1-5 (1 being 'need training' to 5 'able to teach'). The results were collated and shared. Where Appraisers felt that they were 'adequate' (3), we are now able to pair those with an Appraiser who is a 5 (able to teach). One of the outputs of this self-assessment is to ensure that our Appraisers feel confident in managing a difficult medical appraisal.

4. Appraisal & Revalidation Clinics

Appraisal and Revalidation Drop-in Clinics have now been established for the rest of year across a variety of days. The clinics commenced in December and were scheduled 2 weekly. Feedback from these clinics has been very positive.

5. Resource Pack

As an output from the drop-in clinics we have designed and created an Appraisal and Revalidation Resource Pack. We received feedback at the clinic that there is an overwhelming amount of information especially for new starters and it is difficult for them to prioritise. These packs contain all the information that clinicians need to be able to undertake appraisal, 360 MSF, mandatory training and what they need to ensure is in place to receive a positive recommendation. They are able to take this pack away with them and refresh their memory when they receive their appraisal notification.

6. Progress and Planning

1. To maintain and improve the appraisal uptake.
2. To maintain a rate above national average for positive recommendations made to the GMC for Revalidation.
3. To ensure that our Medical Appraisers feel confident in managing a difficult appraisal.

For approval

The Board are asked to;-

1. Note the **appraisal uptake**
2. Support the **progress and planning** required to support revalidation

Nicola Boulding
Medical Director's Office Manager