








MEDICAL APPRAISAL & REVALIDATION QUALITY ASSURANCE

(MARQA) REVIEW 2018/2019





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KEY FINDINGS

1

Overall Appraisal rate in Scotland for all designated bodies during 2018/2019 is 96%, up 4% from 2017/2018.

2

Sector	Appraisal completion
Primary Care	99%
Secondary Care	93%
Total	96%

3

Of the 2811 doctors identified for revalidation in 2018/2019, a positive recommendation was made for 2631 (94%). The comparable figure for 2017/2018 was 84%.

4

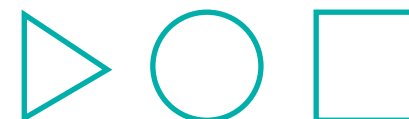
The revalidation decision was deferred for 198 doctors (7%). The comparable figure for 2017/2018 was 16%.

5

This year further sub-analysis of the data was undertaken for both primary and secondary care doctors, to better understand whether there are any challenges for specific sub-groups of doctors. In particular, Clinical Fellows were considered as a separate group for the first time. The appraisal rate for this group was 76%.

6

Last year's report identified a small number of designated bodies where performance could be improved. The review panel particularly wishes to commend the work that has been undertaken by these designated bodies to ensure that these organisations now meet their requirements for appraisal and revalidation.





KEY DATA FOR 2018/2019

Key Data Comparison	2018/2019		2017/2018		Variance
Number of doctors with a prescribed connection	13355		13171		1%
Number of doctors not eligible for an appraisal	715	5%	686	5%	0%
Number of doctors eligible for an appraisal	12640	95%	12485	95%	0%
Number of doctors who completed an appraisal	12068	96%	11508	92%	4%
Number of doctors due for revalidation	2811		515		
Number of doctors who were recommended for revalidation	2631	94%	432	84%	10%
Number of doctors whose revalidation was deferred	198	7%	82	16%	-9%
Number of non-engagement notifications	1		1		0

More doctors were revalidated in 2018/2019 than in the previous year. This is because the structure is such that the majority of the doctors are revalidated within the first three years of the 5-year cycle. The final two years are used predominantly to deal with outstanding issues and doctors who have complex circumstances.

This explains why only 515 were eligible for revalidation in 2017/2018, of whom 84% were revalidated. In comparison in 2018/2019, 2811 doctors were eligible for revalidation, and 2631 (93%) were revalidated.

INTRODUCTION

MEDICAL REVALIDATION

Doctors practising in the UK are required to hold a licence to practise issued by the General Medical Council (GMC) and subject to renewal every 5 years. This is known as medical revalidation and is the process by which medical doctors are legally required to demonstrate that they are up-to-date and fit-to-practise.

Revalidation was introduced as a legal requirement across the UK from December 2012, with the GMC providing the oversight, including advice and support to stakeholders:

<https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation>

Revalidation is based on annual appraisals undertaken in the workplace by trained appraisers. The appraisal must include all aspects of a doctor's work and is based on the GMC's core guidance for doctors, Good Medical Practice:

<https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice>



INTRODUCTION

For the purpose of revalidation a doctor requires to be registered (affiliated) with a designated body as per The Medical Profession (Responsible Officers) Regulations 2010 and 2013. The designated body is required to appoint a responsible officer (RO). The RO has a number of legal responsibilities including a requirement to make a recommendation to the GMC as to whether a doctor should be revalidated based on the outcome of appraisal and any other information that is available. Based on this information the GMC determine whether a doctor's "Licence" should be renewed. In Scotland all the Health Boards are Designated Bodies; with the medical director having the role of RO. The vast majority of doctors are affiliated to their Health Boards for revalidation purposes. A small number of doctors are affiliated to non-NHS bodies who meet the criteria to declare themselves a designated body.

MEDICAL APPRAISAL

Medical Appraisal in Scotland, undertaken by trained appraisers, is not designed to be a pass or fail process, but one that helps a doctor to reflect on their practice and achievements in the past year, and assists them to identify areas for improvement. It does however, include and consider important aspects of a doctor's practice including continuing education, complaints and significant incidents.

"When well delivered I have yet to hear anyone suggest Appraisal is not a worthwhile use of their time. In a stressed world, the benefit of having a protected session to look in on yourself and your professional practice is essential."

Dr Mike Winter (former chair of MARQA Review Panel)

Doctors are assisted in preparing for appraisal by having access to SOAR (Scottish Online Appraisal Resource) which has been developed and hosted by NES. This is available to all doctors in Scotland. It allows doctors to complete their appraisal forms, upload the necessary supporting information and submit them for sharing with their Appraiser. It also allows Responsible Officers (ROs) to make revalidation recommendations directly from SOAR to GMC.



INTRODUCTION

REVALIDATION RECOMMENDATIONS

The RO can make one of the following three recommendations regarding a doctor to the GMC:

- Positive Recommendation
- Deferral
- Non-Engagement

Deferral of revalidation is a neutral act and can arise for a number of reasons, including ill health or when a doctor has a prolonged period of leave. Most doctors are recommended for revalidation at the end of the period of deferment. Doctors who do not engage with appraisal and revalidation may have their licence to practise revoked by the GMC.

REVALIDATION DELIVERY BOARD SCOTLAND (RDBS)

The Revalidation Delivery Board was convened by Scottish Government (SG) to oversee the development and implementation of revalidation in Scotland and to ensure consistency of the process. The Board issues guidance as required. The Board is chaired by Professor Ian Finlay and includes key partners and stakeholders. An important function of the Board is to commission and then consider an independent annual review of appraisal and revalidation across Scotland.



INTRODUCTION

THE MARQA REVIEW

A review of appraisal and revalidation has been commissioned by RDBS on behalf of SG since 2010. This was initially undertaken by Health Improvement Scotland (HIS) but since 2017/2018 it has been produced by NES, when it was re-named “Medical Appraisal & Revalidation Quality Assurance (MARQA) Review”.

REVIEW METHODOLOGY

In the first instance, a self-assessment pack (consisting of a data sheet of appraisal and revalidation completion rates; and a declaration of appraisal and revalidation governance arrangements) is sent to all designated bodies in Scotland for their completion.

This year the self-assessment pack was sent to 47 Designated Bodies, one more than last year.

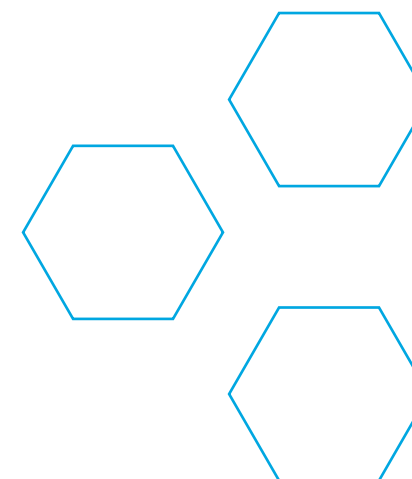
At the conclusion of the first 5-year Revalidation cycle, NES undertook a review of the existing questionnaire pack and consulted with NHS Scotland Health Boards’ Appraisal Leads and Administration teams. As a result, a number of changes were made to the data questionnaire this year.

These included the following:

- The data for primary and secondary care were separated,
- Clinical fellows were identified separately as a sub group and,
- Questions relating to the support of Appraisers were added.

Designated Bodies were also asked to provide a detailed description of their Governance Arrangements.

A panel is convened to review the submitted returns. The Panel can seek further information and where necessary there is an escalation procedure carried out by Healthcare Improvement Scotland.





OUR FINDINGS

REVALIDATION RATES

This year, there were 2811 doctors due for Revalidation; of whom 2631 were Revalidated (94%). This is an increase of 10% from last year.

DEFERRALS

There was a substantial decrease in deferrals this year. In Scotland 7% of doctors were deferred (down from 16% in 2017/2018).

Whilst this was a welcome trend, the nature of the data collection does not include an analysis of the reasons for deferral. The GMC has recently introduced new and more detailed deferral categories, which have been added to SOAR. This will allow the review panel, in the future, to better understand why doctors are deferred.

APPRAISAL COMPLETION RATES: PRIMARY AND SECONDARY CARE FINDINGS

There is a consistently higher appraisal rate in primary care than secondary care.

The overall appraisal rates for all designated bodies and the comparable figures for last year are shown in full in appendix 3.1.

APPRAISER TRAINING & SUPPORT

The submissions indicated that all Appraisers in Scotland are NES-trained, but show that the support provided for Medical Appraisers varied between designated bodies.

The panel agreed that providing continuing support for Appraisers is as important as supporting their initial training in maintaining a high quality and consistent appraisal process. Examples of continuing support include:

- Attendance at NES Appraiser Refresher training (once every 5 years)
- Attendance at local Appraisers' meetings and development days
- Attendance at the NES run annual Scottish Medical Appraisers Conference

APPRAISAL OF CLINICAL FELLOWS

The panel has identified that Clinical Fellows comprise a growing sub-group of doctors who require an appraisal. Health boards are encouraged to ensure that this group of doctors are identified and supported to undergo appraisal.

OUR FINDINGS

DOCTORS WITH A MISSED APPRAISAL IN 2018/2019

Most designated bodies reported that a percentage of the doctors with a prescribed connection to them had not been appraised, having been exempted on specific grounds. Having reviewed those instances where there were significantly higher rates of non-appraisal, the panel was satisfied overall with the additional information and reasons given.

ACKNOWLEDGEMENTS

NES would like to thank all designated bodies for completing and submitting the questionnaires.

The review panel wishes to recognise the efforts made by the following health boards who have shown improvements this year:

- NHS Dumfries & Galloway
- NHS Fife
- NHS Highland
- NHS Tayside



CONCLUSION AND NEXT STEPS

1. It has been a successful year for Medical Appraisal and Revalidation in Scotland with the highest appraisal completion rate to date at 96%.
2. Appraisal rates are generally higher in primary care than in secondary care.
3. The data suggests that the appraisal and revalidation process is firmly embedded in Scotland.
4. In 2018/2019 all appraisals in Scotland were undertaken by a NES trained appraiser.
5. Deferral rates in Scotland are falling; the rate for 2018/2019 is 7%. The new GMC deferral categories (replicated in SOAR) will allow more detailed analysis of the reasons for deferral next year.
6. Clinical fellows are included as a separate category this year for the first time. The appraisal rates for this group are lower than those for other groups of doctors. Designated bodies are encouraged to ensure that they have processes in place to identify and support this group of doctors who are not in formal training.



RECOMMENDATIONS

1

Designated bodies have been required to achieve an overall appraisal rate of 90% (including both primary and secondary care doctors). In some designated bodies, the high appraisal rates in primary care have offset poorer appraisal rates in secondary care. The panel recommended that the 90% threshold for appraisal completion rates should be applied separately to primary and secondary care.

2

Designated Bodies should be mindful that there are an increasing number of doctors who are designated as “clinical fellows” and are employed outwith recognised junior doctor training pathways. DBs should ensure that there are systems in place to identify and support these doctors and to provide them with an appraisal.

3

All appraisers in Scotland must undergo core training to equip them with skills to undertake appraisal. This training also ensures consistency of the appraisal process and is provided by NES.

In addition to core training, continuing support should be given to appraisers to ensure that they maintain their appraisal skills. Examples of this continuing support include:

- Attendance at appraiser Refresher Training Courses
- Organising local appraisers meetings
- Attendance at annual Scottish Medical Appraisers Conference

Details of the Medical Appraiser training programme is available on the Medical Appraisal Scotland website: www.appraisal.nes.scot.nhs.uk



APPENDICES

APPENDIX 1:

Panel and Observers

Names	Role/Organisation
Frances Dow (Chair)	Lay Member
Sharon Baillie	Programme Manager, Healthcare Improvement Scotland
Niall Cameron	GP, NHS Greater Glasgow & Clyde
Rosie Dixon	Primary Care Appraisal Lead, NHS Borders and NHS Lothian
Alison Graham	Medical Director, NHS Ayrshire & Arran
William Liu	Training Manager (Medical Appraisal), NES
Elizabeth Muir	Clinical Effectiveness Co-Ordinator, NHS Fife
Sue Robertson	Specialty and Associate Specialist (SAS) Doctor, NHS Dumfries and Galloway
Christiane Shrimpton	Associate Postgraduate Dean for Appraisal and Revalidation, NES
Robyn Smith	Anaesthetist, Golden Jubilee Centre
Elizabeth Tait	Professional Lead for Clinical Governance, NHS Grampian
Jim Walker	Lay Member
Ian Finlay (Observer)	Scottish Government
Sally White (Observer)	Scottish Government



APPENDICES

APPENDIX 2:

Organisations involved in 2018-2019 review

NHSScotland

- Ayrshire & Arran
- Borders
- Dumfries & Galloway
- Fife
- Forth Valley
- Grampian
- Greater Glasgow & Clyde
- Highland
- Lanarkshire
- Lothian
- Orkney
- Shetland
- Tayside
- Western Isles
- National Waiting Times Centre
- The State Hospitals Board for Scotland
- NHS 24
- NHS Education for Scotland
- Healthcare Improvement Scotland
- NHS Health Scotland
- Scottish Ambulance Service
- NHS National Services Scotland

Hospices

- ACCORD Hospice
- Ardgowan Hospice
- The Ayrshire Hospice
- Bethesda Hospice
- Children's Hospices Across Scotland (CHAS)
- Highland Hospice (part of NHS Highland's submission)
- Marie Curie Edinburgh
- Marie Curie Glasgow
- The Prince & Princess of Wales Hospice
- St Andrew's Hospice (part of NHS Lanarkshire's submission)
- St Columba's Hospice
- St Margaret of Scotland Hospice
- St Vincent's Hospice
- Strathcarron Hospice
- Surehaven Glasgow Hospital (part of NHS Dumfries & Galloway's submission)

APPENDICES

APPENDIX 2:

Organisations involved in 2018-2019 review

Non-NHS Organisations

- Assured Occupational Health Ltd (New Designated Body)
- Castle Craig Hospital
- DHI Scotland
- Glasgow Memory Clinic
- Loudon Surgical Consulting Ltd
- MP Locums Healthcare Ltd
- Mental Welfare Commission for Scotland
- Scottish Government
- TauRx Pharmaceuticals





APPENDICES

APPENDIX 3: Data submission breakdown

Less than 85%

Between 85% and 90%

APPENDIX 3.1:

Overview of Appraisal completion rates for Primary and Secondary Care doctors across Scotland

Sector	NHSScotland Boards		Hospices		Non-NHS Organisations		TOTAL (2018/2019)				Variance	
	Prescribed Connection	Eligible	Prescribed Connection	Eligible	Prescribed Connection	Eligible	Prescribed Connection	Eligible	Appraised	%	2017/18	+/-
Primary Care	5555	5233	3	3	1	1	5559	5237	5190	99%	97%	2%
Secondary Care	7667	7280	52	48	77	75	7796	7403	6878	93%	89%	4%
TOTAL	13222	12513	55	51	78	76	13355	12640	12068	96%	92%	4%



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APPENDIX 3.1.1:

Primary Care Staff Groupings across Scotland

Eligible GPs (i.e. on Performers List) and Completed Appraisals	NHSScotland Boards		Hospices		Non-NHS Organisations		TOTAL (2018/2019)			Variance	
	Eligible	Appraised	Eligible	Appraised	Eligible	Appraised	Eligible	Appraised	%	2017/18	+/-
Principal GP	3302	3280	0	0	0	0	3302	3280	99%	-	-
Employed GP	111	111	0	0	0	0	111	111	100%	-	-
Retainee	50	50	0	0	0	0	50	50	100%	-	-
Sessional (Locum)	985	970	2	2	0	0	987	972	99%	-	-
Associate	4	4	0	0	0	0	4	4	100%	-	-
Retired	2	1	0	0	1	1	3	2	67%	-	-
Salaried	729	722	1	1	0	0	730	723	99%	-	-
Other	50	48	0	0	0	0	50	48	96%	-	-
TOTAL	5233	5186	3	3	1	1	5237	5190	99%	97%	2%



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APPENDIX 3.1.2:

Secondary Care Staff Groupings across Scotland

Eligible Doctors and Completed Appraisals	NHSScotland Boards		Hospices		Non-NHS Organisations		TOTAL (2018/2019)			Variance	
	Eligible	Appraised	Eligible	Appraised	Eligible	Appraised	Eligible	Appraised	%	2017/18	+/-
Consultants (including honorary contract holders)	5508	5204	19	19	5	5	5532	5228	95%	89%	6%
Staff, Associate Specialists, and Specialty Doctors	981	896	26	25	13	13	1020	934	92%	87%	5%
University employed staff with a licence to practice	21	20	0	0	0	0	21	20	95%	85%	10%
Secondary Care Locums (employed for 2 months or more in the 12 months up to 31 March)	321	284	1	1	25	25	347	310	89%	88%	1%



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APPENDIX 3.1.2:

Secondary Care Staff Groupings across Scotland (continued)

Eligible Doctors and Completed Appraisals	NHSScotland Boards		Hospices		Non-NHS Organisations		TOTAL (2018/2019)			Variance	
	Eligible	Appraised	Eligible	Appraised	Eligible	Appraised	Eligible	Appraised	%	2017/18	+/-
Independent healthcare providers only (doctors with practising privileges who have a prescribed connection to the organisation)	3	2	2	2	5	5	10	9	90%	100%	-10%
Clinical Fellows	388	295	0	0	0	0	388	295	76%	-	-
Others (doctors in leadership roles, civil service, in wholly independent practice, and doctors not directly employed)	58	55	0	0	27	27	85	82	97%	91%	6%
TOTAL	7280	6756	48	47	75	75	7403	6878	92%	97%	-5%



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APPENDIX 3.1.3:

Appraisal completion rates for Primary Care (PC) and Secondary Care (SC) staff per Designated Body

NHSScotland Health Boards	Eligible doctors		Completed appraisals				Total		Variance	
	PC	SC	PC	%	SC	%	PC + SC	%	2017/18	+/-
Ayrshire & Arran	340	440	340	100%	400	91%	740	95%	94%	1%
Borders	116	157	114	98%	150	96%	264	97%	95%	2%
Dumfries & Galloway	151	176	151	100%	171	97%	322	99%	86%	13%
Fife	314	328	310	99%	301	92%	611	95%	87%	8%
Forth Valley	275	273	275	100%	261	96%	536	98%	98%	0%
Grampian	550	701	550	100%	653	93%	1203	96%	98%	-2%
Gt Glasgow & Clyde	1105	2082	1095	99%	1941	93%	3036	95%	94%	1%
Highland	435	303	426	98%	278	92%	704	95%	87%	8%
Lanarkshire	477	667	470	99%	559	84%	1029	90%	92%	-2%
Lothian	951	1311	941	99%	1252	96%	2193	97%	95%	2%
Orkney	34	20	33	97%	16	80%	49	91%	89%	2%
Shetland	28	21	28	100%	21	100%	49	100%	95%	5%
Tayside	418	594	415	99%	557	94%	972	96%	74%	22%
Western Isles	33	25	32	97%	20	80%	52	90%	96%	-6%



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APPENDIX 3.1.3:

Appraisal completion rates for Primary Care (PC) and Secondary Care (SC) staff per Designated Body (cont.)

NHSScotland Health Boards	Eligible doctors		Completed appraisals				Total		Variance	
	PC	SC	PC	%	SC	%	PC + SC	%	2017/18	+/-
National Waiting Times Centre	0	101	0	0%	95	94%	95	94%	100%	-6%
The State Hospitals Board for Scotland	0	14	0	0%	14	100%	14	100%	77%	23%
NHS 24	0	0	0	0%	0	0%	0	0%	100%	0%
NHS Education for Scotland	4	7	4	100%	7	100%	11	100%	67%	33%
Healthcare Improvement Scotland	2	8	2	100%	8	100%	10	100%	100%	0%
NHS Health Scotland	0	4	0	0%	4	100%	4	100%	67%	33%
Scottish Ambulance Service	0	0	0	0%	0	0%	0	0%	0%	0%
NHS National Services Scotland	0	48	0	0%	48	100%	48	100%	100%	0%
TOTAL	5233	7280	5186	99%	6756	93%	11942	95%	92%	3%



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APPENDIX 3.1.3:

Appraisal completion rates for Primary Care (PC) and Secondary Care (SC) staff per Designated Body (cont.)

Hospices	Eligible doctors		Completed appraisals				Total		Variance	
	PC	SC	PC	%	SC	%	PC + SC	%	2017/18	+/-
ACCORD Hospice	0	2	0	0%	2	100%	2	100%	100%	0%
Ardgowan Hospice	0	2	0	0%	2	100%	2	100%	100%	0%
The Ayrshire Hospice	0	4	0	0%	4	100%	4	100%	100%	0%
Bethesda Hospice	0	2	0	0%	2	100%	2	100%	100%	0%
Children's Hospices Across Scotland (CHAS)	0	3	0	0%	3	100%	3	100%	0%	100%
Highland Hospice	Submitted as part of NHS Highland's returns									
Marie Curie Edinburgh	0	7	0	0%	7	100%	7	100%	100%	0%
Marie Curie Glasgow	2	2	2	100%	2	100%	4	100%	100%	0%
The Prince & Princess of Wales Hospice	0	4	0	0%	4	100%	4	100%	100%	0%
St Andrew's Hospice	Submitted as part of NHS Highland's returns									
St Columba's Hospice	0	8	0	0%	8	100%	8	100%	100%	0%



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APPENDIX 3.1.3:

Appraisal completion rates for Primary Care (PC) and Secondary Care (SC) staff per Designated Body (cont.)

Hospices	Eligible doctors		Completed appraisals				Total		Variance	
	PC	SC	PC	%	SC	%	PC + SC	%	2017/18	+/-
St Margaret of Scotland Hospice	1	4	1	100%	4	100%	5	100%	100%	0%
St Vincent's Hospice	0	3	0	0%	3	100%	3	100%	67%	33%
Strathcarron Hospice	0	7	0	0%	6	86%	6	86%	100%	-14%
Surehaven Glasgow Hospital	Submitted as part of NHS Dumfries & Galloway's returns									
TOTAL	3	48	3	100%	47	98%	50	98%	97%	1%



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APPENDIX 3.1.3:

Appraisal completion rates for Primary Care (PC) and Secondary Care (SC) staff per Designated Body (cont.)

Non-NHS Organisations	Eligible doctors		Completed appraisals				Total		Variance	
	PC	SC	PC	%	SC	%	PC + SC	%	2017/18	+/-
Assured Occupational Health Ltd	0	0	0	0%	0	0%	0	0%	n/a	n/a
Castle Craig Hospital	0	4	0	0%	4	100%	4	100%	100%	0%
DHI Medical Group Scotland	0	6	0	0%	6	100%	6	100%	n/a	n/a
Glasgow Memory Clinic	0	4	0	0%	4	100%	4	100%	100%	100%
Loudon Surgical Consulting Ltd	0	1	0	0%	1	100%	1	100%	100%	0%
MP Locums Healthcare Ltd	0	25	0	0%	25	100%	25	100%	100%	100%
Mental Welfare Commission for Scotland	0	3	0	0%	3	100%	3	100%	100%	0%
Scottish Government	0	31	0	0%	31	100%	31	100%	97%	3%
TauRx Pharmaceuticals	1	1	1	100%	1	100%	2	100%	100%	0%
TOTAL	1	75	1	100%	75	100%	76	100%	99%	1%



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APPENDIX 3.2:

Overview of Doctors Identified for Revalidation across Scotland

Designated Body Type	Due Revalidation in 2018/19	Positive Recommendations	%	Deferrals	%	Non-Engagement
NHS Scotland Health Boards	2785	2607	94%	196	7%	1
Hospices	10	10	100%	0	0%	0
Non-NHS Organisations	16	14	88%	2	13%	0
TOTAL	2811	2631	94%	198	7%	1



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APPENDIX 3.2.1

Breakdown of Doctors Identified for Revalidation per Designated Body

NHSScotland Health Boards	Due Revalidation in 2018/19	Positive Recommendations	%	Deferrals	%	Non-Engagement
Ayrshire & Arran	145	140	97%	8	6%	0
Borders	57	50	88%	7	12%	0
Dumfries & Galloway	85	76	89%	9	11%	0
Fife	125	117	94%	17	14%	0
Forth Valley	111	107	96%	5	5%	0
Grampian	280	264	94%	16	6%	0
Gt Glasgow & Clyde	656	622	95%	37	6%	0
Highland	203	191	94%	12	6%	0
Lanarkshire	254	228	90%	27	11%	0
Lothian	476	451	95%	26	6%	1
Orkney	8	7	88%	1	13%	0
Shetland	9	8	89%	1	11%	0
Tayside	323	300	93%	23	7%	0
Western Isles	13	11	85%	2	15%	0



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APPENDIX 3.2.1

Breakdown of Doctors Identified for Revalidation per Designated Body (cont.)

NHSScotland Health Boards	Due Revalidation in 2018/19	Positive Recommendations	%	Deferrals	%	Non-Engagement
National Waiting Times Centre	28	24	86%	4	14%	0
The State Hospitals Board for Scotland	2	2	100%	0	0%	0
NHS 24	0	0	0%	0	0%	0
NHS Education for Scotland	3	3	100%	0	0%	0
Healthcare Improvement Scotland	1	1	100%	0	0%	0
NHS Health Scotland	1	0	0%	1	100%	0
Scottish Ambulance Service	0	0	0%	0	0%	0
NHS National Services Scotland	5	5	100%	0	0%	0
TOTAL	2785	2607	94%	196	7%	1



APPENDICES

APPENDIX 3.2.1

Breakdown of Doctors Identified for Revalidation per Designated Body (cont.)

Hospices	Due Revalidation in 2018/19	Positive Recommendations	%	Deferrals	%	Non-Engagement
ACCORD Hospice	1	1	100%	0	0%	0
Ardgowan Hospice	0	0	0%	0	0%	0
The Ayrshire Hospice	1	1	100%	0	0%	0
Bethesda Hospice	2	2	100%	0	0%	0
Children's Hospices Across Scotland (CHAS)	0	0	0%	0	0%	0
Highland Hospice	<i>Submitted as part of NHS Highland's returns</i>					
Marie Curie Edinburgh	3	3	100%	0	0%	0
Marie Curie Glasgow	3	3	100%	0	0%	0
The Prince & Princess of Wales Hospice	0	0	0%	0	0%	0
St Andrews Hospice	<i>Submitted as part of NHS Lanarkshire's returns</i>					
St Columba's Hospice	0	0	0%	0	0%	0



APPENDICES

APPENDIX 3.2.1

Breakdown of Doctors Identified for Revalidation per Designated Body (cont.)

Hospices	Due Revalidation in 2018/19	Positive Recommendations	%	Deferrals	%	Non- Engagement
St Margaret of Scotland Hospice	0	0	0%	0	0%	0
St Vincent's Hospice	0	0	0%	0	0%	0
Strathcarron Hospice	0	0	0%	0	0%	0
Surehaven Glasgow Hospital	Submitted as part of NHS Dumfries & Galloway's returns					
TOTAL	10	10	100%	0	0%	0



APPENDICES

APPENDIX 3.2.1

Breakdown of Doctors Identified for Revalidation per Designated Body (cont.)

Non-NHS Organisations	Due Revalidation in 2018/19	Positive Recommendations	%	Deferrals	%	Non-Engagement
Assured Occupational Health Ltd	0	0	0%	0	0%	0
Castle Craig Hospital	0	0	0%	0	0%	0
DHI Medical Group Scotland	0	0	0%	0	0%	0
Glasgow Memory Clinic	1	1	100%	0	0%	0
Loudon Surgical Consulting Ltd	0	0	0%	0	0%	0
MP Locums Healthcare Ltd	1	0	0%	1	100%	0
Mental Welfare Commission for Scotland	0	0	0%	0	0%	0
Scottish Government	14	13	93%	1	7%	0
TauRx Pharmaceuticals	0	0	0%	0	0%	0
TOTAL	16	14	88%	2	13%	0



APPENDICES

APPENDIX 3.3

Overview of 5-year Appraisal Completion trends *Number (and percentage) of completed appraisals from 2014/15 to 2018-2019*

NHSScotland Health Boards	2014/15	%	2015/16	%	2016/17	%	2017/18	%	2018/19	%
NHSScotland Health Boards	10972	93%	11029	92%	11158	94%	11380	92%	11942	95%
Hospices	39	83%	47	96%	52	96%	54	97%	50	98%
Non-NHS Organisations	55	81%	69	88%	76	96%	71	99%	76	100%
TOTAL	11066	93%	11145	92%	11286	94%	11505	92%	12068	96%



APPENDICES

APPENDIX 3.3.1

Breakdown of 5-year Appraisal Completion trends per Designated Body

NHSScotland Health Boards	2014/15	%	2015/16	%	2016/17	%	2017/18	%	2018/19	%
Ayrshire & Arran	699	96%	727	99%	712	96%	729	94%	740	95%
Borders	244	87%	235	89%	271	95%	273	95%	264	97%
Dumfries & Galloway	300	92%	258	80%	296	89%	256	86%	322	99%
Fife	562	92%	551	84%	557	94%	547	87%	611	95%
Forth Valley	492	95%	516	92%	537	99%	562	98%	536	98%
Grampian	1114	98%	1175	98%	1207	98%	1236	98%	1203	96%
Gt Glasgow & Clyde	2735	92%	2778	94%	2854	95%	2908	94%	3036	95%
Highland	699	91%	670	90%	687	94%	633	87%	704	95%
Lanarkshire	916	89%	934	93%	893	92%	956	92%	1029	90%
Lothian	1992	92%	2021	92%	2099	95%	2203	95%	2193	97%
Orkney	59	98%	51	94%	47	100%	49	89%	49	91%
Shetland	38	84%	42	95%	43	96%	37	95%	49	100%
Tayside	925	94%	852	89%	732	81%	761	74%	972	96%
Western Isles	53	95%	49	82%	49	98%	51	96%	52	90%



APPENDICES

APPENDIX 3.3.1

Breakdown of 5-year Appraisal Completion trends per Designated Body (cont.)

NHSScotland Health Boards	2014/15	%	2015/16	%	2016/17	%	2017/18	%	2018/19	%
National Waiting Times Centre	77	85%	95	95%	97	93%	108	100%	95	94%
The State Hospitals Board for Scotland	14	100%	14	82%	13	93%	10	77%	14	100%
NHS 24	2	100%	2	100%	2	100%	1	100%	0	0%
NHS Education for Scotland	7	70%	8	100%	7	100%	4	67%	11	100%
Healthcare Improvement Scotland	3	100%	8	100%	8	100%	8	100%	10	100%
NHS Health Scotland	4	100%	4	100%	3	75%	2	67%	4	100%
Scottish Ambulance Service	0	0%	0	0%	0	0%	0	0%	0	0%
NHS National Services Scotland	37	100%	39	100%	44	100%	46	100%	48	100%
TOTAL	10972	93%	11029	92%	11158	94%	11380	92%	11942	95%



APPENDICES

APPENDIX 3.3.1

Breakdown of 5-year Appraisal Completion trends per Designated Body (cont.)

Hospices	2014/15	%	2015/16	%	2016/17	%	2017/18	%	2018/19	%
ACCORD Hospice	2	100%	2	100%	2	100%	2	100%	2	100%
Ardgowan Hospice	0	0%	1	100%	2	100%	1	100%	2	100%
The Ayrshire Hospice	4	100%	4	100%	5	100%	6	100%	4	100%
Bethesda Hospice	2	100%	2	100%	2	100%	2	100%	2	100%
Children's Hospices Across Scotland (CHAS)	0	0%	2	100%	2	100%	0	0%	3	100%
Highland Hospice	Submitted as part of NHS Highland's returns									
Marie Curie Edinburgh	5	71%	7	100%	7	100%	8	100%	7	100%
Marie Curie Glasgow	NA		7	88%	6	100%	4	100%	4	100%
The Prince & Princess of Wales Hospice	7	78%	3	100%	4	80%	6	100%	4	100%
St Andrew's Hospice	Submitted as part of NHS Lanarkshire's returns									
St Columba's Hospice	5	100%	4	100%	8	100%	9	100%	8	100%



APPENDICES

APPENDIX 3.3.1

Breakdown of 5-year Appraisal Completion trends per Designated Body (cont.)

Hospices	2014/15	%	2015/16	%	2016/17	%	2017/18	%	2018/19	%
St Margaret of Scotland Hospice	5	100%	4	100%	3	100%	4	100%	5	100%
St Vincent's Hospice	2	100%	1	100%	2	67%	2	67%	3	100%
Strathcarron Hospice	7	78%	10	91%	9	100%	10	100%	6	86%
Surehaven Glasgow Hospital	Submitted as part of NHS Dumfries & Galloway's returns									
TOTAL	39	83%	47	96%	52	96%	54	97%	50	98%



APPENDICES

APPENDIX 3.3.1

Breakdown of 5-year Appraisal Completion trends per Designated Body (cont.)

Non-NHS Organisations	2014/15	%	2015/16	%	2016/17	%	2017/18	%	2018/19	%
Assured Occupational Health Ltd									0	0%
Castle Craig Hospital	7	100%	7	100%	3	60%	2	100%	4	100%
DHI Medical Group Scotland					5	100%			6	100%
Glasgow Memory Clinic	0	0%	1	100%	1	100%	2	100%	4	100%
Loudon Surgical Consulting Ltd							1	100%	1	100%
MP Locums Healthcare Ltd	5	42%	15	65%	26	96%	25	100%	25	100%
Mental Welfare Commission for Scotland	4	80%	4	100%	3	100%	5	100%	3	100%
Scottish Government	32	97%	32	97%	33	100%	32	97%	31	100%
TauRx Pharmaceuticals					3	100%	2	100%	2	100%
TOTAL	55	81%	69	88%	76	96%	71	99%	76	100%



APPENDICES

APPENDIX 3.4

Revalidation of Doctors in Training

Year	Doctors in Training	Due Revalidation	%	Revalidated	%
2014/2015	5920	552	9%	511	93%
2015/2016	5673	643	11%	643	100%
2016/2017	5723	570	10%	570	100%
2017/2018	5783	691	12%	691	100%
2018/2019	5683	560	10%	560	100%



APPENDICES

APPENDIX 4 - GLOSSARY

Terminology	Description
Annual Appraisal	<p>The formative process of preparing, collating and reflecting on information relating to the doctor's whole practice; followed by a discussion with an appraiser at a formal, confidential meeting.</p> <p>The appraisal meeting between the appraisee (the doctor) and appraiser should take place every year. The appraisal year for both primary and secondary care has been aligned to the financial year (1 April–31 March). An appraisal is considered to be completed when the summary of the appraisal discussion and Personal Development Plan have been recorded and signed off by the appraiser and appraisee (Appraisal Form 4), within 28 days of the appraisal meeting.</p> <p>Where an appraisal is not signed off or did not take place, a Form 5 should be used in lieu of a Form 4. Form 5A is used where there is a legitimate reason for not being appraised (e.g. maternity leave, long term sick, sabbatical etc); and Form 5B is used for non-engagement.</p>
Clinical Fellows	<p>This group of doctors are employed on contracts that are neither recognised training positions nor career grade posts. They have a range of experience and responsibility for direct patient care. For example, some may be taking time out of their training programme to acquire teaching or research experience and others may be employed directly for service purposes. Some of the latter group can be at a relatively early stage in their medical careers and some may be international medical graduates; both groups would be unfamiliar with the UK appraisal process.</p>



APPENDICES

APPENDIX 4 - GLOSSARY

Terminology	Description
Designated Body	An organisation that employs or contracts with doctors and is designated in The Medical Profession (Responsible Officer) Regulations 2010, as amended by The Medical Profession (Responsible Officer) (Amendment) Regulations 2013.
General Medical Council (GMC)	The public body that maintains the official register of medical practitioners within the UK. Its chief responsibility is 'to protect, promote and maintain the health and safety of the public' by controlling entry to the register and suspending or removing members when necessary.
Good Medical Practice (GMP)	Good Medical Practice, published by the GMC, sets out the principles and values on which good practice is founded; these principles together describe medical professionalism in action. The guidance is addressed to doctors, but it is also intended to let the public know what they can expect from doctors: www.gmc-uk.org/guidance/good_medical_practice.asp
Independent Healthcare Provider	An NHS term for a healthcare services provider (a term which, as used in the UK, refers to an organisation, not an individual healthcare professional) that operates independently of the NHS.



APPENDICES

APPENDIX 4 - GLOSSARY

Terminology	Description
Licence to Practise	To practise medicine in the UK, all doctors are required by law to be both registered and hold a licence to practise. This applies to practising full time, part time, as a locum, privately or in the NHS, or employed or self-employed. Licences are issued, renewed and withdrawn by the GMC.
Prescribed Connection	The formal link between a doctor and their Designated Body. It is the route by which doctors are able to find their Responsible Officer. Regulation 10 and 12 in The Medical Profession (Responsible Officer) Regulations 2010 set out the 'prescribed connection' between designated bodies and doctors and these are explained in more detail in the Responsible Officer guidance.
Remediation	The overall process agreed with a practitioner to redress identified aspects of underperformance. Remediation is a broad concept varying from informal agreements to carrying out some re-skilling, to more formal supervised programmes of remediation or rehabilitation.
Responsible Officer (RO)	A licensed doctor with a least five years' experience who has been nominated or appointed by a Designated Body. In Scotland, Medical Directors have been appointed as Responsible Officers and they have a key role in developing more effective liaison between organisations and the GMC as the regulatory body for all doctors. They also oversee the arrangements for medical revalidation, including all methods of evaluating fitness to practise. The GMC will make the final decision on revalidation of any doctor.



APPENDICES

APPENDIX 4 - GLOSSARY

Terminology	Description
Revalidation	Medical Revalidation is the 5-yearly process to renew a doctor's licence to practise. Recommendations are made by the doctor's Responsible Officer to the GMC.
Revalidation Recommendation: Positive	<p>A "positive" recommendation to revalidate is a formal declaration from a Responsible Officer to the GMC that a licensed doctor remains up-to-date and fit to practise. The Responsible Officer has to be assured that doctors have:</p> <ul style="list-style-type: none">• met the GMC's requirements for revalidation• participated in systems and processes to support revalidation• collected the required supporting information for revalidation
Revalidation Recommendation: Deferral	If the RO is not satisfied with the information provided to make a positive recommendation, the doctor's Revalidation can be deferred, usually up to 6 months.
Scottish Online Appraisal Resource (SOAR)	The national online system used to record appraisal for trainees and doctors in primary and secondary care.

Medical Appraisal & Revalidation Quality Assurance (MARQA) Review 2018/2019

This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on **0131 656 3200** or email **altformats@nes.scot.nhs.uk**.



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