

## GOVERNMENT HEALTH DIRECTORATES

# WHITE PAPER – TRUST ASSURANCE AND SAFETY – THE REGULATION OF HEALTH PROFESSIONALS IN THE 21<sup>ST</sup> CENTURY

## IMPLEMENTATION IN SCOTLAND

### CROSS PROFESSIONAL FITNESS TO PRACTISE GROUP

**Workstream:** %Revalidation of Doctors - Implementation+

**Aim of paper:** To define the terms of reference of the Revalidation Delivery Board.

#### Introduction

1. Arising from the 2007 White Paper, [Trust, Assurance and Safety - the Regulation of Health Professionals in the 21st Century](#), the English Department of Health published the final report of the Revalidation Working Group on 23<sup>rd</sup> July, 2008: [Medical revalidation – principles and next steps](#). This document clearly lays out the principles which will underpin re-licensure, recertification and revalidation of doctors.
2. The General Medical Council (GMC) will start to issue licenses to practice from October 2009 and has set up a UK Revalidation Programme Board to oversee the delivery of the revalidation process by the four countries of the UK.
3. Given this short timescale, there is a need to establish a Scottish group that will bring together the key organisations and stakeholders that will support the Responsible Officers in NHSScotland (NHSS) Boards deliver revalidation for doctors.
4. A key function of the Revalidation Delivery Board for Scotland (RDB) will be to ensure good communication between all the organisations that will support NHSScotland implement revalidation of doctors and the Cross-Professional Fitness to Practice Group and the UK Revalidation Programme Board.

#### Action Required

5. To note the Terms of Reference of the UK Revalidation Programme Board;
5. To support the establishment of the Revalidation Delivery Board;
6. To agree the proposed membership of the RDB;
7. To ask the C-PFtP Group to finalise these draft terms of reference;
8. To agree that the chair of the proposed RO Network will be the chair of the RDB.

#### Proposed Membership

9. The RDB will comprise;
  - two ROs from the RO Network;
  - representative of SGHD;

Revalidation Group

A;

ish Affairs, General Medical Council

- Ben Jones, Head of Revalidation Projects, General Medical Council
- Representative of NHS Quality Improvement Scotland (QIS)
- Representative of NHS Education for Scotland (NES)
- Representative of the public

### Terms of Reference

10. The RDB will oversee the operational implementation of re-licensure, recertification and revalidation of doctors in NHSS Boards. It will be an advisory group to the C-PFtP Group.

11. The RDB may identify areas of work required to support ROs implement re-licensure, recertification and revalidation of doctors in NHSS Boards. It will determine who should be involved in resolving such issues in consultation with the C-PFtP Group.

11. The RDB may identify areas where guidance is required to ensure that the component elements of professional regulation for doctors are delivered in a robust and consistent manner across NHSScotland Boards. The chair of the Network will raise any issues through the RDB to the C-PFtP Group to determine how this should be taken forward.

12. The RDB will identify any risks associated with the implementation of revalidation and report these to the C-PFtP Group for discussion on mitigation.

13. This RDB will report to the C-PFtP Group and will provide a report to the UK Revalidation Programme Board on the progress of implementation of medical revalidation in Scotland. The RDB chair will provide a written update at least one week prior to each meeting of the C-PFtP Group.

14. All guidance issued from the RDB will be submitted in draft to the Co-Chairs of the Cross-Professional Fitness to Practise Group for initial approval, and will remain in draft until sanctioned by the Co-Chairs of the Overarching Implementation Steering Group.

### Resources

15. At this point in time it is not anticipated that there will be any costs associated with setting up this Revalidation Delivery Board. It is anticipated that any necessary secretariat functions will be supported from within.

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