Press release

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Revalidation is adding value but there is more to do, report reveals

London, UK – 14 March 2014, 9.30am:

One year into implementation, medical revalidation is delivering value, but more needs to be done to maximise benefits in the future, according to a report published today by the NHS Revalidation Support Team (RST).

The Early Benefits and Impact of Medical Revalidation report summarises research carried out in 2013-14 on the early benefits and impact of medical revalidation in England. The findings are based on an analysis of 3,500 responses to surveys on the impact of revalidation from doctors, appraisers, responsible officers and designated bodies.

This evidence base is supported by findings from two additional research reports commissioned by the RST: one from The King's Fund on the impact of revalidation on culture and behaviour in seven case study sites and one from Plymouth University Peninsula Schools of Medicine and Dentistry on patient and public involvement in revalidation.

Evidence that revalidation is delivering value include:

- a continued increase in appraisal rates (which increased from 63% to 76% between March 2011 and March 2013)
- an increased focus on the quality of appraisers and the appraisal process
- indicative signs that concerns about a doctor’s practice are being identified at an earlier stage
- strong support for the system among responsible officers and appraisers
- strong support from doctors, appraisers and responsible officers for medical appraisal, a key element of revalidation.
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However, the report also highlights a few areas where further work is needed:

- While doctors continue to value appraisals and continuing professional development, some feel that revalidation is not yet relevant to their needs.
- Doctors, appraisers and responsible officers are, on average, taking slightly longer than expected in this first year, to participate in appraisal and revalidation.
- Patients and the public need clearer and more powerful roles in revalidation in the future.

The King’s Fund’s report, *Medical Revalidation: from compliance to commitment* finds that revalidation has been successful in driving compliance in the appraisal process for doctors but advises leaders not to ‘rest on their laurels’. For revalidation to reach its full potential it recommends leaders look beyond the process to encourage commitment to professional development and improving patient care.

Health Minister Dr Dan Poulter said:

“Doctors save lives every day and being up to speed with the latest treatments and technologies is essential in providing high quality patient care. This is why a proper system of revalidation is so important. We know there is more for hospitals to do in supporting staff with their annual appraisals, but it is good to see that the quality and frequency of appraisals is increasing.”

Allan Coffey, RST Chief Executive said:

“The purpose of medical revalidation is to improve patient care by bringing all licensed doctors into a governed system that prioritises professional development and strengthens personal accountability. It is encouraging to see that revalidation is beginning to make a difference.”
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Ralph Critchley, Director of Research and Quality Improvement at the RST said:

“It is early days and, based on the research, we have identified a number of recommendations which will help improve the process going forward. This will be important in ensuring revalidation develops in the right way and contributes to continuing public confidence in the medical profession.”

Professor Jenny Simpson, NHS England’s Clinical Director for Revalidation, said:

“The revalidation programme is on course to meet the target of revalidating 20 per cent of doctors this year. NHS England will build on the extensive work of the RST in taking revalidation forward, with the goal of revalidating all licensed doctors in England by March 2016.

Revalidation is central to how NHS England is meeting its responsibilities to both patients and staff in improving safety and the quality of care. As the programme continues, we look forward to using the RST’s work, alongside the Department of Health’s long-term research programme, to identify further core benefits, so that we may continue to make improvements to patient care and prevent harm.”

Vijaya Nath, Assistant Director in Leadership Development at The King’s Fund said:

“The roll out of revalidation has led to more doctors complying with the appraisal process. However, it is too often seen as a tick-box exercise when it could be used as a powerful tool to drive professional development and improve organisational culture. Leaders play a critical role supporting doctors to work in this way so they are motivated to improve patient care ‘when no one is watching’. This will enable doctors to move from compliance to commitment.”

Dr Julian Archer, Director of the Collaboration for the Advancement of Medical Education Research and Assessment (CAMERA), Plymouth University Peninsula Schools of Medicine and Dentistry which has today published its Patient and Public Involvement in Medical Revalidation, commented:
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“Most of the people we spoke to during research for this report said that they were pro patient involvement but there were no guidelines.”

Dr Sam Regan de Bere who led the research, said:

“Our findings show that in order for patient and public involvement (PPI) to be meaningful, those using it need to be clear about its three elements (patient, public and lay representative) and ask themselves why they want to engage, what sort of engagement they are looking for and how they can recruit and support those they engage. We believe that our report may create the framework from which a national PPI structure and guideline can be drawn.”

-Ends-
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Notes to editors

1. The NHS Revalidation Support Team (RST), part of Guy’s and St Thomas’ NHS Foundation Trust, is a Department of Health-funded body that has supported the development and implementation of revalidation for doctors since 2008. This has included:
   • supporting NHS England, responsible officers and designated bodies to develop the systems and processes to support the implementation of revalidation, and
   • undertaking research to ensure that medical revalidation is implemented in a way that maximises the benefits for patients, doctors and employers.

2. NHS England took over responsibility for overseeing the implementation of revalidation across all designated bodies in England from the Department of Health (England) in October 2013.

3. Over the course of 2013-14, the RST has been transferring revalidation knowledge, expertise and functions to NHS England. The RST will close, as planned, on 31 March 2014.

4. The RST’s report *The Early Benefits and Impact of Medical Revalidation* and associated FAQs can be found here: www.revalidationsupport.nhs.uk/news_media/news-article.php?id=45

5. The King’s Fund’s report, *Medical Revalidation: from compliance to commitment* can be found here: www.kingsfund.org.uk/revalidation2014

6. CAMERA’s *Patient and Public Involvement in Medical Revalidation* can be found here: www1.plymouth.ac.uk/peninsula/research/camera/Pages/default.aspx

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