
Guidance for recruiting for the delivery of case manager training

Responding to concerns about
a doctor's practice

Introduction

Revalidation of doctors is a key component of a range of measures designed to improve the quality of care for patients; it is the process by which the General Medical Council will confirm the continuation of doctors' licences to practise in the UK. The purpose of revalidation is to assure patients and the public, employers and other healthcare professionals that licensed doctors are up to date and fit to practise.

Through a formal link with their organisation, determined usually by employment or contracting arrangements, doctors will relate to a senior doctor in an organisation, the responsible officer. The responsible officer will make a recommendation about the doctor's fitness to practise to the General Medical Council (GMC). The recommendation will be based on the outcome of the doctor's annual appraisals over the course of five years, combined with information drawn from the organisation's clinical governance systems. Following the responsible officer's recommendation, the GMC will decide whether to renew the doctor's licence.

The responsible officer is accountable for the quality assurance of the appraisal and clinical governance systems in their organisation. Improving these systems will support doctors in developing their practice more effectively, which will add to the safety and quality of healthcare in the UK. It will also enable the early identification of those doctors whose practice needs attention, allowing for more effective intervention.

The responsible officer in a designated body has a statutory duty to initiate an investigation when there are concerns about a doctor's practice. The responsible officer must appoint an appropriately trained case investigator who is separate from the decision-making process. The case manager is often the responsible officer but this role may be delegated to an appropriately qualified case manager who will oversee the investigation process, set the terms of reference and receive the findings.

Document purpose

This document aims to describe the requirements and considerations for high-quality case manager training to enable future commissioning of this training. It also provides guidance on selection of appropriate delegates for this training.

In 2011 the NHS Revalidation Support Team (RST) undertook a survey in England around responding to concerns about a doctor's practice in the previous 12 months. There were also workshops facilitated in all ten of the then strategic health authorities (SHAs), with members of the responding to concerns teams (responsible officers, human resource directors and others). The survey and workshops resulted in the RST publication *Supporting Doctors to Provide Safer Healthcare: Responding to concerns about a doctor's practice* in March 2012¹.

One of the areas of need was training of case investigators. The RST, in partnership with the National Clinical Assessment Service (NCAS), has trained more than 1,000 case investigators since January 2013. Feedback from the case investigator training was hugely positive but highlighted the need for focused case management training to increase awareness of the boundaries and scope of the different roles. Therefore the RST, in partnership with NCAS, has trained more than 600 case managers in the last 12 months across England.

The case manager is often the responsible officer but this role can be delegated. Organisations must ensure that case managers are appropriately trained to perform the role.

Primary audience

This document is primarily for:

- organisations commissioning case manager training
- providers of case manager training.

It may also be of interest to:

- responsible officers
- medical appraisers
- human resource managers
- occupational health professionals.

¹ A revised version was published in March 2013.

Training objective

The training should ensure that case managers have sufficient knowledge and skills to carry out the role.

Training providers should also ensure that the training is:

- of high quality and covers all appropriate areas (see training content)
- delivered by facilitators with the correct expertise and experience (see skills and knowledge of trainers).

Training content

The training should ideally be delivered as a one-day training programme. The training should include workshops and be interactive, including an opportunity to practice the skills a case manager requires and ask questions. It should include the discussion of sample cases. National guidance should be referred to and provided as part of the training materials. Training materials must include relevant and current NHS England policies, *Maintaining High Professional Standards in the Modern NHS* (Department of Health, 2003) and/or *The National Health Service (Performers Lists) (England) Regulations 2013*, as applicable to the audience.

There should be an assumed level of knowledge around the principles of revalidation and responsible officer regulations² and pre-course reading materials should be made available to support this and to provide background information, plus an opportunity for reflection on the role and the challenges it presents.

The pre-reading materials should include a case study, sample terms of reference and a case investigators final report.

Post-course reading will cover the closing stages of the pathway which may fall into the remit of the case manager including interventions and support, agreeing remediation action plans, supervised practice, educational needs, specialist health and occupational health, doctor support, organisational support, monitoring progress and closure.

² *The Medical Profession (Responsible Officer) Regulations 2010* and *The Medical Profession (Responsible Officers) (Amendment) Regulations 2013*

The following themes should be covered as part of the core training day.

1. The role of the case manager

- responsibilities of the role
- the responding to concerns team infrastructure
- organisational policies and structure
- the role of the board and CEO or similar
- supporting the practitioner
- communications and media management
- conflicts of interest and appearance of bias

2. The investigation pathway

- preliminary assessment/review
- who to talk to/keep informed
- when not to investigate
- writing terms of reference
- selecting and commissioning a case investigator – terms and conditions around appointment, indemnity, letters of agreement, bias
- briefing a case investigator – project plan, sharing access to records and confidential information, ownership of case investigation records, agreeing and amending terms of reference, commissioning specialist expertise
- meeting with the practitioner and their representatives – agreeing information sharing and lines to take
- meeting with complainants – information sharing

3. The role of the case investigator

- What is in/out of scope?
- method of investigation – fact finding, evidence selection, weighting, conclusions.

4. Decision-making and recommendations

- the role of the panel – selection of panel members, decision-making on fact, equality, perceptions of bias, rationale for decision-making
- reviewing and weighting a case investigation report against other known information
- considering previous concerns and incidents
- writing recommendations

5. Next steps

- potential outcomes – remediation plans, disciplinary process
- legal challenges/Employment tribunals – recent case law
- presenting the management case
- action plans – remediation
- evaluation – feedback on CI process, assurance of quality
- development as part of CPD in the role reviewed in appraisal

Skills and knowledge of the trainers

All selected training providers need to be capable of delivering high-quality medical management/leadership training. The providers should be able to demonstrate:

- experience of delivering and facilitating medical management/leadership training programmes with good feedback
- high-quality facilitation skills through feedback from participants on delivered programmes.
- knowledge of revalidation and the organisations involved (GMC, NHS/service, royal colleges etc.)
- detailed knowledge of the responsible officer legislation, guidance and current *Maintaining High Professional Standards in the Modern NHS* (Department of Health, 2003), *The National Health Service (Performers Lists) (England) Regulations 2013* and NHS England responding to concerns policies as applicable to the training delegates
- senior medical involvement in the delivery of the programme (e.g. involvement of a responsible officer/medical director or equivalent)
- understanding of how broader health policies/structures will impact on revalidation
- understanding of processes involved in responding to concerns about doctors
- understanding of available resources for remediation e.g. coaching, retraining, mentorship, occupational health etc.

Selection of the delegates

Delegates must be appropriately selected to attend the training. The following case manager person specification will aid selection of delegates to attend the training.

Person specification for a case manager

The **essential** requirements are the experience, skills and knowledge of the person undertaking the role. The qualifications and attitudes are **desirable** for an effective case manager, but some could be developed through training. It is essential that such training is carried out before a person becomes a case manager.

Qualifications

- educated to degree level or equivalent
- has completed appropriate case manager training or can demonstrate knowledge of the training themes
(This may not be essential requirement prior to appointment but should ideally be completed before taking up the role of case manager.)

Experience

- involvement in management at a senior level (e.g. medical director or deputy, associate medical director, clinical head of service etc.)
- some experience of judging or reviewing evidence against a standard and triangulating data

Skills

- ability to assess evidence and decide whether an investigation is necessary
- high level of interpersonal and communication skills, including accessing information and opinions as required
- ability to judge the need for support of those involved and access this (e.g. occupational health, mentorship)
- ability to make judgements on the need for a doctor's practice restriction (and what this involves) or suspension/exclusion
- manage the restriction, suspension/exclusion process
- developed organisational and planning skills, including providing the case investigator with appropriate evidence to start the investigation
- ability to write focused terms of reference for an investigation including the flexibility to review and rewrite these if the case investigator brings appropriate data to indicate this is needed

- ability to lead where necessary and advise the case investigator on process issues to keep to timescales
- ability to seek out advice and judge it as required (e.g. from NCAS, medical royal colleges)
- ability to interpret relevant guidance documents and standards
- ability to ensure safeguards are in place to avoid breaches of confidentiality
- interpretation of the report and any other information in order to decide on outcome/next steps
- ability to structure and write recommendations for the doctor and organisation and implement these
- presentation skills, including ability to present the case to a disciplinary panel

Knowledge

- understands the role of a case manager
- must engage in continuing professional development for the role
- knowledge of the revalidation and regulatory process, including *Maintaining High Professional Standards in the Modern NHS* (for case investigators of employed doctors) or *The National Health Service (Performers Lists) (England) Regulations 2013* (for case investigators of contractors) and/or organisational policies and processes
- knowledge of equality and diversity issues
- knowledge of the process of investigation and its independence from the case manager role (not essential prior to appointment as will be part of training in the role)
- knowledge of the requirements of information governance
- knowledge of organisational governance structures and standards
- knowledge of processes involved if restricted practice, suspension/exclusion required
- knowledge of remedial processes (e.g. occupational health, coaching, mentorship etc.)

Attitudes

- motivated, conscientious and able to deliver to deadlines
- demonstrates integrity and has strategies for dealing with potential challenges to this
- has respect of and for colleagues
- resilient and objective in situations of conflict
- committed to keeping up to date and fit to practice in the role of case manager.