

REPORT TO THE TRUST BOARD *AUGUST 2014*

Paper Title:	Revalidation & Medical Appraisal Annual Report and Statement of Compliance
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Purpose: <i>The purpose of bringing the report to the board</i>	<i>To provide an overview of the elements defined in the Responsible Officer Regulations, and providing the required assurance that we are discharging our respective statutory responsibilities.</i>
Action required by the board: <i>What is required of the board – e.g. to note, to approve...?</i>	For decision <i>Agree to submit an annual statement of compliance to the higher level responsible officers.</i>
Document previously considered by: <i>Name of the committee which has previously considered this paper / proposals</i>	EMT
Executive summary <i>Key points in the report and recommendation to the board</i> <p>1. Key messages</p> <p>St George's Healthcare NHS Trust has a prescribed connection to 651 doctors. The appraisal rate for the Trust is currently 86.76%, above the Trust target of 85%. The number of recorded appraisals has increased steadily since Medical Revalidation was introduced in 2012. The current number of recorded Trust Appraisals is 435.</p> <p>2. Recommendation</p> <p>The Board are asked to accept this annual report and annual audit. This report will be shared with NHS England along with the quarterly information reports.</p> <p>The Board are asked to approve the "statement of compliance" confirming that St George's Healthcare NHS Trust, as a designated body, is in compliance with the Revalidation regulations.</p>	
Key risks identified: <i>It is a requirement for all doctors for to undertake yearly strengthened appraisals and to revalidate once every five years in order to keep their licence to practice. The trust is responsible to ensure there is a process in place to ensure that this is achieved.</i>	
Related Corporate Objective: <i>Reference to corporate objective that this paper refers to.</i>	

Related CQC Standard: <i>Reference to CQC standard that this paper refers to.</i>	
Equality Impact Assessment (EIA): Has an EIA been carried out? (Yes / No) If yes, please provide a summary of the key findings	
If no, please explain you reasons for not undertaking and EIA.	

Appendix A:**1. EQUALITY IMPACT ASSESSMENT FORM – INITIAL SCREENING**

Headline outcomes for the Equality Delivery System (EDS)

- Better health outcomes for all
- Improved patient access and experience
- Empowered, engaged and well-supported staff
- Inclusive leadership at all levels

Service/Function/Policy	Directorate / Department	Assessor(s)	New or Existing Service or Policy?	Date of Assessment
				15 Oct 2010
1.1 Who is responsible for this service / function / policy?				
1.2 Describe the purpose of the service / function / policy? <i>Who is it intended to benefit? What are the intended outcomes?</i>				
1.3 Are there any associated objectives? <i>E.g. National Service Frameworks, National Targets, Legislation , Trust strategic objectives</i>				
1.4 What factors contribute or detract from achieving intended outcomes?				
1.5 Does the service / policy / function / have a positive or negative impact in terms of the protected groups under the Equality Act 2010. These are Age, Disability (physical and mental), Gender-reassignment, Marriage and Civil partnership, Pregnancy and maternity, Sex /Gender, Race (inc nationality and ethnicity), Sexual orientation, Region or belief and Human Rights				
1.6 If yes, please describe current or planned activities to address the impact.				
1.7 Is there any scope for new measures which would promote equality?				
1.8 What are your monitoring arrangements for this policy/ service				
1.9 Equality Impact Rating [low, medium, high]				
2.0. Please give your reasons for this rating				