



REVALIDATION for PHYSICIANS

A resource guide for physician specialties

Neurology

INTRODUCTION

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.

In order to maintain your licence to practice you will be expected to have at least one appraisal per year that is based on the General Medical Council's (GMC) core guidance for doctors, *Good Medical Practice*. You will need to maintain a portfolio of supporting information drawn from your current practice which demonstrates how you are continuing to meet the requirements set out by the GMC.

The GMC has set out its requirements for good medical practice, appraisal and revalidation for all doctors in three main documents. These are supported by specialty-specific guidance from the medical royal colleges and faculties, which gives the specialty context for the supporting information required for appraisal. You should therefore ensure that you are familiar with the following:

- [Good Medical Practice](#)
- [Good Medical Practice framework for appraisal and revalidation](#)
- [Supporting information for appraisal and revalidation](#)
- [Supporting information for appraisal and revalidation: guidance for physicians](#) (applicable across all physician specialties and approved by the Association of British Neurologists).

Revalidation is based on a doctor's current scope of practice. It does not dictate a set number of hours in any specialty or field of practice. All doctors, regardless of their specialty need to demonstrate that they are continuing to meet the requirements set out in Good Medical Practice.

Among the many physician specialties and subspecialties it is recognised that the details of the clinical work undertaken will differ, and that there is a great diversity of medical practice. It is important that the supporting information you provide is comprehensive and relevant to your field of practice. The purpose of this guide from the Association of British Neurologists is to signpost to informative and practical resources for collecting the supporting information required for revalidation.

In order to revalidate, you must collect supporting information as set out in the GMC's Supporting Information for appraisal and revalidation:

- general information about you and your professional work
- keeping up to date
 - CPD
- review of practice
 - quality improvement activity
 - significant events
- feedback on professional practice
 - colleague feedback
 - patient and carer feedback
 - complaints and compliments.

This guide offers signposting to information and resources which neurologists will find useful as they compile their supporting information portfolio for revalidation. Involvement in any of the suggested activities does not guarantee that you will be revalidated. However, the activities are recognised by

the Association of British Neurologists as promoting the highest standards in the field of Neurology.

The Royal College of Physicians hosts a revalidation helpdesk, which we recommend that you use in the event that you need advice on appraisal or revalidation: revalidation@rcplondon.ac.uk. You should also familiarise yourself with the resources available from the RCP:

www.rcplondon.ac.uk/revalidation.

ASSOCIATION OF BRITISH NEUROLOGISTS

Association of British Neurologists is the Specialist Association for Consultants and trainees in neurology: <http://www.theabn.org/>

SUB SPECIALTY INFORMATION

<http://www.nice.org.uk/>

NICE has produced extensive guidance on the management of a number of neurological conditions. These include:

- Epilepsy (CG137)
- Multiple Sclerosis (CG8)
- Parkinson's Disease (GC35)
- Dementia (CG42)
- Stroke (CG68)
- Headache (CG150)

NICE has also produced a number of interventional procedure guidance (IPG) and technology appraisals (IP) that may be relevant to your clinical practice.

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

CPD should encourage and support evidence-based changes in practice and career development and be relevant to your practice. All physicians should demonstrate 50 hours of CPD per year (250 hours over the five year revalidation cycle, of which 125 should be external).

Recommended learning opportunities

Courses and CPD activities can be found on the ABN website

<http://www.theabn.org/Meeting.aspx>

QUALITY IMPROVEMENT ACTIVITY

Clinical Guidelines and audit resources

NICE has developed clinical audit tools for its technology appraisals, clinical guidelines and selected interventional procedures and electronic audit tools on some topic that may be relevant to your clinical practice.

<http://www.nice.org.uk/usingguidance/implementationtools/clinicalaudit.jsp>

<http://www.nice.org.uk/usingguidance/implementationtools/ElectronicAudit.jsp>

Other audit tools include:

Adult First seizure audit produced by ILAE <http://www.ilae-uk.org.uk/audit.html>

Case review

Case review or discussion activities might include:

- MDT meetings
- Attendance and presentation of clinical cases presentations at academic meetings.
- Relevant mortality and morbidity meetings
- Clinical governance meetings.

- Structured reviews of practice with colleagues.

Case reviews may form the main supporting information in support of quality improvement in neurology.

FEEDBACK ON PRACTICE

The Royal College of Physicians of London provides important information about the revalidation process and tools to use for patient and colleague feedback are provided

(<http://www.rcplondon.ac.uk/cpd/revalidation/supporting-information-tools-and-templates>)

In addition physicians can also use feedback tools approved/commissioned by their employing NHS Trusts, provided that these comply with the criteria for validity set out by the GMC (http://www.gmc-uk.org/doctors/revalidation/colleague_patient_feedback.asp)