



REVALIDATION for PHYSICIANS

A resource guide for physician specialties

Respiratory Medicine

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 British Thoracic Society).

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 British Thoracic Society is to signpost respiratory physicians 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 respiratory physicians 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 British Thoracic Society as promoting the highest standards in the field of respiratory medicine.

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 .

THE BRITISH THORACIC SOCIETY

The British Thoracic Society (BTS) is a registered charity with over 2,800 paid-up members in respiratory medicine and allied professions (November 2012) and is the professional voice of respiratory medicine in the UK. The Society's statutory objectives are "the relief of sickness and the preservation and protection of public health by promoting the best standards of care for patients with respiratory and associated disorders, advancing knowledge about their causes, prevention and treatment and promoting the prevention of respiratory disorders". The Society's main activities include:

Developing and promoting optimum standards of care

Activities include the production of Quality Standards, Audit Tools, feedback and national benchmarking, Commissioning and Service Development advice and guidance; and workforce development, monitoring and support (via the work of its Standards of Care, Professional and Organisational Standards, and Workforce Committees, as well as through IMPRESS www.impressresp.com). The Society works at government and Health Department level across the UK, providing information and advice when required.

Promoting and disseminating research and innovation

Activities include the production of the journal *Thorax*; the annual Winter Meeting; the policy work of the Science & Research Committee and participation in the UK Respiratory Research Collaborative. The Society promotes innovation and best practice directly and in collaboration with others, applying for, and promoting, relevant Awards which recognise achievement and innovation.

Promoting and advancing knowledge

Activities include the provision of a wide range of educational opportunities via the work of the Education & Training Committee (the BTS Summer Meeting; short courses; e-learning and related collaborations); the production of BTS position statements about lung diseases and service delivery; and work in relation to prevention of respiratory illness. Support for smoking cessation will remain in the forefront of the Society's work. The Society's Public Liaison Committee and the Council have an important advisory role in these activities (as they do in all the Society's work). The Society works pro-actively and reactively, and in partnership with others, through the work of our Specialist and Professional Advisory Groups and our Respiratory Champions.

Information on the Society can be found here: www.brit-thoracic.org.uk

SUB SPECIALTY INFORMATION

The British Thoracic Society has been at the forefront of guideline production for over 25 years. Guidelines are written in accordance with the BTS manual for guideline production which received NICE Accreditation in 2011. BTS Guidelines are based on available evidence and adhere to the AGREE criteria (<http://www.agreetrust.org/>). They are regularly updated and are available to download free from the BTS website (www.brit-thoracic.org.uk).

In future, BTS quality standards will be produced based on each Guideline to underpin the Society's commitment to driving service improvement and promoting excellent patient care.

Those working in respiratory medicine will be involved in a number of Specialist investigative and therapeutic procedure services including:

- Bronchoscopy
- Medical thoracoscopy
- Ward-based ultrasound-guided pleural drain insertion
- Sleep-related breathing disorders
- Ward non-invasive ventilation (NIV) for acute respiratory failure (due to exacerbations of COPD)
- Long Term Oxygen Assessment
- Domiciliary assisted-ventilation service
- Pulmonary rehabilitation service
- Specialist on call

Examples of specialist services provided at a local level include:

- Lung cancer
- Critical care
- Tuberculosis services
- Difficult asthma
- Interstitial Lung Disease
- Bronchiectasis
- Pleural disease

Examples of specialist services provided at a regional or supra-regional level:

- Cystic fibrosis
- Lung transplantation
- Pulmonary vascular disease
- Occupational lung diseases

Further details of the specialty can be found in the RCP publication: Consultant Physicians Working for Patients, 2011

<http://www.rcplondon.ac.uk/resources/series/consultant-physicians-working-patients>

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

Consultant Respiratory Physicians draw upon a range of resources for Continuing Professional Development including:

- BTS short courses
- BTS e-learning modules
- BTS Summer Meeting (annual conference focusing on continuing professional education)
- BTS Winter Meeting (the annual national and international conference for clinical and scientific research in respiratory medicine)

None of these courses or activities is mandatory for respiratory physicians but the Society aims to offer a balanced portfolio of educational activities to assist its members in maintaining high standards of clinical practice.

Full details of all British Thoracic Society conferences and courses can be found here:
<http://www.brit-thoracic.org.uk/bts-learning-hub.asp>

QUALITY IMPROVEMENT ACTIVITY

BTS Audit Programme

The British Thoracic Society runs a nationally recognised programme of respiratory audits in the following areas:

- Adult Asthma
- Adult Community Acquired Pneumonia
- Adult non-invasive ventilation
- Adult Bronchiectasis
- COPD Discharge
- Adult Emergency Oxygen
- Pleural procedures
- Paediatric Asthma
- Paediatric Pneumonia
- Paediatric Bronchiectasis

The BTS audit programme is available via an online system which provides BTS members and others with the tools to audit, benchmark and identify areas for improvement in local services.

<https://audits.brit-thoracic.org.uk/>

BTS audits are recommended for inclusion in Quality Accounts in England. It is therefore likely that Chest Physicians will present evidence of participation in National Audit as part of their portfolio of evidence demonstrating safe practice.

A number of other national audits are available in respiratory medicine:

- National COPD audit (part of NCAPOP programme) 2013 onwards
- National Review of Asthma Deaths (2012/13)

BTS Care Bundles for COPD and CAP

In 2012/13 the British Thoracic Society is running a project to introduce care bundles in COPD and CAP in a limited number of hospitals across the country. The care bundle resources are also for other hospitals to quality improvement on a local basis.

<http://www.brit-thoracic.org.uk/Delivery-of-Respiratory-Care/Quality-Improvement.aspx>

BTS Interstitial Lung Disease Registry

BTS Interstitial Lung Disease Registry project covering two diseases:

- Idiopathic Pulmonary Fibrosis (IPF)
- Sarcoidosis

The project aims to provide a means of national data collection for both IPF and Sarcoidosis through the development of the BTS online data collection system. The intention is to provide an easily accessed system for prospective data collection in a large number of patients so that the public health and epidemiological status of these conditions in the UK can be established. The Registry is now open for data collection and participation from clinicians working with patients with these conditions is encouraged.

<http://www.brit-thoracic.org.uk/delivery-of-respiratory-care/registries-in-lung-disease.aspx>

FEEDBACK ON PRACTICE

Physicians can use feedback tools approved/commissioned by their employing NHS Trusts. Instruments used for this element of revalidation must meet the guidelines published by the GMC: http://www.gmc-uk.org/doctors/revalidation/colleague_patient_feedback.asp.

The Royal College of Physicians of London provides important information about the revalidation process and validated tools to use for patient and colleague feedback: (<http://www.rcplondon.ac.uk/cpd/revalidation/supporting-information-tools-and-templates>)

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