



REVALIDATION for PHYSICIANS

A resource guide for physician specialties

Stroke 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 Association of Stroke Physicians).

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 Association of Stroke Physicians 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 stroke 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 Association of Stroke Physicians as promoting the highest standards in the field of Stroke 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.

BRITISH ASSOCIATION OF STROKE PHYSICIANS

British Association of Stroke Physicians (BASP): <http://www.basp.ac.uk/>. This is the specialist society for stroke physicians and through the web-site provides information and guidance for members.

SUB SPECIALTY INFORMATION

Stroke medicine is a sub-speciality of Medicine which is often practiced by physicians from a variety of backgrounds. They will need to ensure they are revalidating in all sub-specialties.

Within stroke medicine the clinical areas which will need to be considered include:

- Hyperacute Stroke Care
- Acute Stroke Care
- Neuro-vascular clinic and secondary prevention
- Stroke Rehabilitation

It is recognised that not all stroke physicians practice in all these areas.

The practice of Stroke Medicine in the UK is guided by a number of documents:

The National Inter-collegiate Stroke Guidelines

(<http://www.rcplondon.ac.uk/sites/default/files/national-clinical-guidelines-for-stroke-fourth-edition.pdf>)

In England the National stroke strategy

http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_081059.pdf)

In the devolved nations additional guidance is available.

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

There is an extensive range of opportunities available for stroke medicine.

The key conference is the annual UK Stroke Forum (<http://www.ukstrokeforum.org/>)

QUALITY IMPROVEMENT ACTIVITY

Recommended guidelines and audit resources (in England, Wales and Northern Ireland):

Stroke improvement national audit programme (SINAP) provides extensive audit data on both service and specifically medical practice which will support revalidation.

<http://www.rcplondon.ac.uk/projects/stroke-improvement-national-audit-programme-sinap>

The newly established Sentinel Stroke National Audit Programme (SSNAP)

<http://www.rcplondon.ac.uk/projects/sentinel-stroke-national-audit-programme>

FEEDBACK ON PRACTICE

The RCP provides validated colleague and feedback questionnaires and accompanying guidance.

Please see <http://www.rcplondon.ac.uk/cpd/revalidation/supporting-information-tools-and-templates/feedback-and-revalidation>.

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.