



FPH Clinical Governance Policy

October 2012 v2.1 (currently being revised in 2021)

Introduction

Enhancing and strengthening the process of appraisal for revalidation requires efficient clinical governance and quality improvement systems to be in place.

This document outlines the FPH clinical governance policy as related to the revalidation of those doctors with a prescribed connection to FPH.

It includes the corporate governance policy for the FPH revalidation service with regards to information management systems, clinical governance data, requirements precipitated by a change in designated body, the managing performance concerns and the complaints procedure.

Scope

This policy is relevant in all four nations of the United Kingdom and applies to all fellows and members irrespective of age, disability, race, colour, nationality, ethnic origin, religion, gender, sexual orientation or marital status, domestic circumstances, social and employment status, HIV status, gender reassignment, political affiliation or trade union membership.

Accountability for clinical governance

The FPH Responsible Officer is responsible for the clinical governance of doctors with a prescribed connection to FPH and quality improvement and assurance of the FPH Revalidation service.

Information Management System

For doctors with a prescribed connection to FPH, a portfolio will be mandatory for the collation of the supporting information required for their revalidation-ready appraisal. This portfolio is then submitted to the appraiser for review and access prior to and during the appraisal meeting. It will be accessed by the RO during the revalidation cycle to evidence their recommendation to the GMC/UKPHR. It may also be accessed as necessary by the FPH Revalidation Officer.

This portfolio is provided to the individual as opposed to an organisation, thus, if a doctor moves organisation, they are able to maintain a portfolio of evidence throughout the revalidation cycle and (where appropriate) a new appraiser or RO is able to evaluate the evidence.

Not only does this portfolio provide a comprehensive listing of past appraisals for the individual's records, but it is imperative for revalidation that an RO is able to evaluate five years' worth of supporting evidence.

The outcome of each appraisal, as well as the recommendation relating to revalidation is also recorded on this platform, so as to maintain a coherent record of events for governance and audit purposes.

Doctors with a prescribed connection to FPH will not be able to be recommended for revalidation if they do not have sufficient information for their appraisal cycle. As such, it is the responsibility of the individual doctor/specialist to maintain their records and appraisal folder.

It is important that a doctor records all key information in the portfolio, including a record of complaints made against them. Under the terms of *Good Medical Practice* all doctors must declare any supporting information which may have a bearing on their performance. Failure to do so may relate in GMC sanctions.

FPH will maintain a record of the appraisal portfolio and outcomes for doctors with a prescribed connection to the Faculty. All information gathered and stored by FPH as part of the revalidation process portfolio is stored on a secure server accessible only to the appraisee, appraiser, RO and FPH revalidation officer. It may be necessary for the Head of the Professional Standards to access the data. For more information please consult the [FPH privacy policy](#).

The information may be shared with a third party such as when a doctor's Prescribed Connection changes. In this case, the portfolio, appraisal outcome and any concerns will be shared with and requested from the new/previous designated bodies' RO or appraiser.

Clinical Governance Data

Almost all of the doctors revalidating through the Faculty will be in independent practice. FPH does not employ these doctors therefore the Responsible Officer only has access to limited clinical governance information. In order to address this issue the Faculty asks doctors revalidating through us to sign a 'Clinical Governance Declaration' form which confirms that the doctor is not subject to certain procedures that may indicate a fitness to practice issue.

As such FPH monitors the quality of individual and team performance except through the evidence presented at annual appraisal, and response to directly received complaints.

FPH routinely monitors the GMC's decision circular which contains details of all sanctions brought against UK registered doctors on a monthly basis.