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Report to:	Trust Board of Directors	Date: 03 October 2024
Report from:	Dr Stephen Webb Deputy Medical Director and Responsible Officer	
	Dr Ian Smith	
	Medical Director	
Principal Objective/	GOVERNANCE	
Strategy and Title	Revalidation Annual Report April 2023 – March 2024	
Board Assurance	Unable to provide safe, high quality care	
Framework Entries	BAF number: 744	
Regulatory Requirement	CQC, GMC	
Equality Considerations	None believed to apply	
Key Risks	Non-compliance resulting in poor outcomes for patients and financial penalties	
For:	Approval	

Summary:

The Trust is required by NHSE to submit an annual report to the Board in order to provide assurance that patient care is being supported by fulfilling the statutory obligation of the Responsible Officer for the Trust. The aim is for the Designated Body (Royal Papworth Hospital NHS Foundation Trust) not only to demonstrate basic compliance but also continuing improvement over time.

The Annual Organisation Audit (AOA) (Appendix A) has been adapted this year to include a greater focus on EDI and culture alongside the Trust values. There is also now a greater emphasis on verbal reflection and discussion in appraisal meetings in order to support and underpin the mental health and wellbeing of our clinical staff.

The AOA sections record the actions from last year's report and then the comments and actions for 2024/25 are detailed underneath.

Appraisal rates have fluctuated through 2023/24 from between 74% - 84% across the year. The continuing periods of industrial action over the last 8-9 months have had a negative impact on many elements of BAU for our clinical workforce and appraisal completion has been no different.

The Trust will be facilitating a further full day's training programme on Appraisal for Revalidation, delivered by the Royal College of Physicians in September 2024 to ensure an appropriate cohort of trained appraisers is available for the Trust.

In 2024, NHSE developed a Peer Review process for the appraisal and revalidation function for all Trusts. This process is for designated bodies to undertake a structured self-assessment with one or more other Designated Bodies in the region. The aim of this is to support good governance and provide assurance primarily to the RO, the Trust Board and NHSE. This is separate from formal Designated Body reviews which may be carried out from time to time by NHSE but would provide useful information in the event of a formal review. NHSE defined Royal Papworth Hospital's matched designated body as Norfolk and Norwich University Hospitals NHS Foundation Trust. The process of this Peer Review defines that:-



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- Each Designated Body, together with their own team, use the checklist and question prompts to undertake a self-assessment of their appraisal and revalidation processes.
- Designated Bodies share their self-assessment with their paired Designated Body.
- Designated Bodies review their partnered Designated Bodies self-assessment and arrange a mutually convenient session to meet up (either face to face or remotely).
- The intention is for the checklist/question prompts to be used to support a conversation between both Designated Bodies which shares good practice, identifies areas for change and discussed options.
- One RO can Chair the meeting or a neutral Chair can be identified. RPH chose to have a joint forum with both RO's providing equal input but with a main lead from N&N.
- At the end of the meeting, an output form to be completed for each Designated Body, signed by both and then submitted to NHSE within 28 days of the arranged meeting (this was completed).
- The checklist/question prompts and both peer review outcome forms are attached to this cover paper for the Committee's information (Appendix 1, 2 and 3).

Both Royal Papworth Hospital and the Norfolk & Norwich University Hospitals NHS Foundation Trust found this exercise beneficial and informative and look forward to further collaboration next year.

Recommendations:

The Board of Directors is asked to approve the contents of this report.