

# A Framework of Quality Assurance for Responsible Officers and Revalidation

## Annex E - Statement of Compliance

Version 4, April 2014



## NHS England INFORMATION READER BOX

### Directorate

<b>Medical</b>	Operations	Patients and Information
Nursing	Policy	Commissioning Development
Finance	Human Resources	

### Publications Gateway Reference:

**01142**

<b>Document Purpose</b>	Guidance
<b>Document Name</b>	A Framework of Quality Assurance for Responsible Officers and Revalidation, <b>Annex E - Statement of Compliance</b>
<b>Author</b>	NHS England, Medical Revalidation Programme
<b>Publication Date</b>	4 April 2014
<b>Target Audience</b>	All Responsible Officers in England
<b>Additional Circulation List</b>	Foundation Trust CEs , NHS England Regional Directors, Medical Appraisal Leads, CEs of Designated Bodies in England, NHS England Area Directors, NHS Trust Board Chairs, Directors of HR, NHS Trust CEs, All NHS England Employees
<b>Description</b>	The Framework of Quality Assurance (FQA) provides an overview of the elements defined in the Responsible Officer Regulations, along with a series of processes to support Responsible Officers and their Designated Bodies in providing the required assurance that they are discharging their respective statutory responsibilities.
<b>Cross Reference</b>	The Medical Profession (Responsible Officers) Regulations, 2010 (as amended 2013) and the GMC (Licence to Practise and Revalidation) Regulations 2012
<b>Superseded Docs</b> (if applicable)	Replaces the Revalidation Support Team (RST) Organisational Readiness Self-Assessment (ORSA) process
<b>Action Required</b>	Designated Bodies to receive annual board reports on the implementation of revalidation and submit an annual statement of compliance to their higher level responsible officers (ROCR approval applied for).
<b>Timings / Deadline</b>	<b>From April 2014</b>
<b>Contact Details for further information</b>	<a href="mailto:england.revalidation-pmo@nhs.net">england.revalidation-pmo@nhs.net</a> <a href="http://www.england.nhs.net/revalidation/">http:// www.england.nhs.net/revalidation/</a>

### Document Status

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## Statement of Compliance

### Designated Body Statement of Compliance

The Board of Directors of Barnsley Hospital NHS Foundation Trust has carried out and submitted an annual organisational audit (AOA) of its compliance with The Medical Profession (Responsible Officers) Regulations 2010 (as amended in 2013) and can confirm that:

1. A licensed medical practitioner with appropriate training and suitable capacity has been nominated or appointed as a responsible officer;
2. An accurate record of all licensed medical practitioners with a prescribed connection to the designated body is maintained;
3. There are sufficient numbers of trained appraisers to carry out annual medical appraisals for all licensed medical practitioners;
4. Medical appraisers participate in ongoing performance review and training / development activities, to include peer review and calibration of professional judgements (Quality Assurance of Medical Appraisers or equivalent);
5. All licensed medical practitioners<sup>1</sup> either have an annual appraisal in keeping with GMC requirements (MAG or equivalent) or, where this does not occur, there is full understanding of the reasons why and suitable action taken;
6. There are effective systems in place for monitoring the conduct and performance of all licensed medical practitioners<sup>1</sup>, which includes [but is not limited to] monitoring: in-house training, clinical outcomes data, significant events, complaints, and feedback from patients and colleagues, ensuring that information about these is provided for doctors to include at their appraisal;
7. There is a process established for responding to concerns about any licensed medical practitioners<sup>1</sup> fitness to practise;
8. There is a process for obtaining and sharing information of note about any licensed medical practitioners' fitness to practise between this organisation's responsible officer and other responsible officers (or persons with appropriate governance responsibility) in other places where licensed medical practitioners work;
9. The appropriate pre-employment background checks (including pre-engagement for Locums) are carried out to ensure that all licenced medical practitioners<sup>2</sup> have qualifications and experience appropriate to the work performed; and

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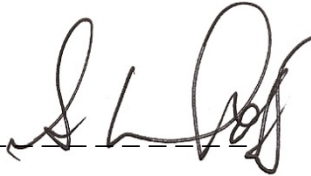
<sup>1</sup> Doctors with a prescribed connection to the designated body on the date of reporting.

<sup>2</sup> Doctors with a prescribed connection to the designated body on the date of reporting.

10. A development plan is in place that addresses any identified weaknesses or gaps in compliance to the regulations.

Signed on behalf of the designated body

Name: Mr Stephen Wragg  
Chairman

Signed: 

Date: 15 August 2014