

Return to practice

Week 1 – Revalidation presentation transcript

This is a transcript for the presentation available at
<https://cppe.instructure.com/courses/246/pages/revalidation>

Slide 1

Welcome to this presentation on revalidation. I have been a revalidation reviewer since 2005 to the RPS and the GPhC. You will have varying knowledge on the process, but I hope this video will give you useful information and top tips on revalidation.

Slide 2

We know that pharmacy professionals are highly regarded by the public. The public expect and believe there are periodic checks on us as pharmacy professionals to confirm our practice remains safe and effective beyond our initial registration. Revalidation provides this reassurance.

Slide 3

In your reading on the online course, we asked you to read the revalidation framework, which is the key document for revalidation. Revalidation encourages us to reflect on our practice. It focuses on outcomes for people using our services. The requirements for revalidation are not changed by factors such as being part time, not patient-facing, and living and working outside the UK.

Slide 4

Revalidation is a continuous process. Each year, the GPhC expects us to submit six records: four CPD records, one peer discussion and one reflective account. They are submitted at annual renewal of registration.

Slide 5

Revalidation is all about reflective practice. It encourages us to critically evaluate our practice and learning to improve outcomes for patients or other users of our services. We need to reflect using these types of questions. It is something we do naturally, but is now a formal requirement as part of revalidation.

Slide 6

Pharmacy professionals work in many different places and roles, providing services to a variety of people – not just patients. The GPhC use the term ‘people using your services’ to refer to any person or organisation receiving services from a pharmacy professional. This is not an exhaustive list.

Slide 7

You record your record in an online portal. There is a useful crib sheet which explains how to set up your account. If you're not currently on the register, when you are returned to the register you will be sent instructions on how to access the portal.

Slide 8

You sign in with a private e-mail and a password of your choice.

Slide 9

The portal has details of your registration, the revalidation section and renewal section – which becomes live when due.

Slide 10

At renewal, you need to submit four CPD records. At least two have to be planned. You can have all four planned, three planned and one unplanned, or two of each. The system will not let you record more than two unplanned records.

The excluded records are those you are not including in this year's submission. For example, you may have started a record but have not been able to put the learning into practice. Or there may be a record you are unsure whether you wish to submit. In the future, you could delete the record if you choose not to use, or complete the record and submit in the following year. The exceptional circumstances section provides information on what you need to do if you cannot submit all your records. I will cover this later. 'Past submissions' holds all your previous records submitted to the GPhC.

Slide 11

A CPD planned record has three questions and three blank boxes to include information you wish to record. If you click on the eye it will reveal the blue box which has information on what the GPhC expect to be included. These are also the criteria used by the revalidation reviewers. I will illustrate with an example on repeat dispensing. You need to provide a title – so 'Repeat dispensing'.

Question 1: What are you planning to learn? Be specific. 'I want to learn XYZ.' In our example: 'I want to learn how repeat dispensing works', 'what patients are eligible', 'how prescriptions are accessed from the spine', 'how to change nominations'.

Explain why it is relevant to your role – 'I am returning to community pharmacy and repeat dispensing is an essential service that I have to be able to offer'.

How will it affect the people using your services? 'It will affect patients as they will expect to collect their prescription.' 'It affects colleagues as they will expect me to provide the service and not ask too many questions.' 'It will definitely affect the organisation as it is an essential service.'

Question 2: How are you planning to learn about repeat dispensing? You need to consider the different activities you could undertake. In our example, you could undertake the repeat dispensing e-course. Attend

the session at the online workshop, pass the e-assessment, work shadow to watch the process and definitely read information on the PSNC website.

In a planned record, you should provide more than one learning activity. Provide details, eg, the name of the workshop and the provider, a web address – for a journal or a book provide the titles and dates. You need to provide a real example and a benefit of how you used it, so write in the past tense. 'I dispensed a repeat prescription, asked the patient relevant questions and uploaded to the spine for payment.'

Benefits could be:

- 'I feel more confident to deliver the service.'
- 'I have met the organisation's contract.'
- 'The patient thanked me for my help.'
- 'I have passed the e-assessment, which confirms my understanding of the topic.'

If you are returning to the register, you may not have a real example. Within your portfolio for submission to the GPhC, the evaluators accept 'this is what I will do with the learning and this will be the benefit'.

Slide 12

An unplanned CPD record is around an activity where you didn't know in advance that you need to learn something. It could be completely new information, or a refresher. For example:

- a GP or patient asked you a question and you had to look up the information.
- you were reading a journal and spotted a useful article for your practice.
- you were sent an e-mail by a colleague or your organisation which included information needed to your role.
- you attended a meeting and there were several speakers on topics that you didn't know were being covered.

You need to clearly state what you have learned as you didn't set any objectives in advance. The example and benefit are similar to the planned record, but you are encouraged to think about next steps. Is there any additional learning you need to undertake?

We have provided two examples on Canvas – one planned and one unplanned – which hopefully will be useful.

Slide 13

Peer discussion is reflection on your practice and learning over the past year, since your last renewal with the GPhC. It is formative and designed to change practice. It has to be an open and honest discussion with someone you trust and respect. Please note it is not a review of your performance at work, such as an annual appraisal. Research shows having another person's point of view can help us to reflect on our practice and reduce potential isolation.

Slide 14

Peer discussion needs to be with someone who understands your role. Within the narrative you submit to the GPhC, you reflect on the discussion and do not need to provide the detail of the discussion, so it can remain confidential. However, you do need to provide the details of your peer to the GPhC so they can confirm the discussion took place. It is sensible for you and the peer to make a record of when the discussion took place so you can remember if asked by the GPhC for confirmation.

A peer discussion needs to take place in real time – face-to-face or by phone, Skype, Zoom or Teams.

Slide 15

There is guidance on the GPhC website for you, the peer and the employer to understand the process. The peer doesn't have to be a pharmacy professional. However, there are some people who you can't have as your peer:

- a family member
- someone you are in a close relationship with
- where there is a conflict of interest
- someone under sanction from a healthcare regulatory body.

You choose your peer.

Slide 16

What do you need to record? Who your peer is, why you chose them and how they understand your role.

Don't include the name or details of the peer in your narrative, as this could compromise data protection. You record this information on a specific part of the film.

You should reflect on the discussion and how it has allowed you to reflect on your learning and practice over the previous year, and how you can make improvements going forward. If you wish, you can share your CPD, personal development plan and reflective account with your peer if that aids the discussion. The peer will ask questions to help you to reflect on your actions that you can take to improve your practice.

The peer discussion can take place at any time in the year, but I suggest you complete early enough in the year to put it into practice, as again, you have to provide real examples of how you have used the discussion to improve your practice.

The peer discussion can also include feedback from patients and colleagues.

Slide 17

The revalidation framework is based on affirming the core standards for pharmacy professionals. By providing a reflective account, it focuses on how we meet the standard, increases awareness and understanding and allows us to identify gaps that may need to be worked on in the next year.

Slide 18

Throughout the course, we encourage you to reflect on the standards, how you meet them and what gaps you have in your skills and knowledge. We recommend having a copy of the standards readily available throughout the course. There are nine standards and you are asked to read them as part of the online course. Each standard has an overview and then bullet points providing more details.

Slide 19

The GPhC will tell the professions which standards we need to reflect on each year by the online portal, the GPhC website and Regulate. You can choose to reflect on one of the standards or several of the ones chosen by the GPhC, as they are often interrelated. You need to describe your role, for example:

- What sector do you work in? *Community, hospital, primary care?*

- What is your role? *Manager, locum?*
- What services do you provide?
- Who are the typical users of your service? *Patients, other healthcare professionals, carers?*

You need to write how you meet the standard or standards chosen using specific examples from your practice and how they benefit your practice. It is worth clearly stating which standard you were reflecting on. You could explain how you meet the standards supporting patients, training colleagues and interacting with other health and social care professionals. Use the bullet points to support your narrative – but you don't have to cover every point.

Slide 20

You will need to check which standards are current. I will discuss one standard to illustrate. Please note this may not currently be a standard being asked for by the GPhC. Clearly state that you are reflecting on 'Standard One – Pharmacy professionals must provide person-centred care'.

Slide 21

You could provide an example of a consultation with a patient. Make sure you do not include any identifiable information.

You could explain:

- how you gained consent for a service
- how you used consultation skills such as the Golden Minute
- how you explored the person's ideas concerned and expectations, to ensure the consultation was person-centred and addressed the patient's agenda
- how you provided relevant information in a format to suit the patient
- how you have undertaken training on safeguarding and cultural competence.

Throughout the course we will discuss case studies and scenarios where you can apply person-centred care.

Slide 22

Once you've received notification from the GPhC that your submission is due, the website changes to allow you to submit your revalidation records and renew your registration. Use the upload button when ready to submit. You then have to complete a declaration that there is no confidential, identifiable patient information in your records.

If you do not submit enough records or have patient information in your records, you will not meet the core criteria, will be moved to remediation and your registration will be at risk. After submission, you will get a confirmation from the website. The records will be safely stored, and a new year will begin. At the same time, you will have to complete your renewal with declarations and pay your fee.

Slide 23

When the records go to review, the GPhC will check all core criteria; (the) 'correct number' (of entries), 'received on time' and 'no patient information'. If not, it will go to remedial measures. (You will be) asked to submit again and will automatically go to full review. At least a random 2.5 percent of the register go to full review (plus any submitted late), fitness to practice and remedial action. GPhC will let you know if within full if we are within the full review system and how long it will take. The record is reviewed by a pharmacy

professional and a lay person using the criteria in the revalidation framework. They will write a tailored report (which you will receive) on what you did well and what you could improve.

Slide 24

The GPhC appreciates that sometimes there are reasons why people can't submit all their records on time, eg, maternity leave, sick leave, military postings.

If it is for a good reason, the GPhC will make a decision which may include less records or an extension. It is important to let the GPhC know as early as possible. If there is not a good reason, you will be put in remediation and asked to resubmit, and if you still don't meet the requirements you will be removed from the register. Please bear in mind if you then reapply to rejoin the register, the GPhC will expect the missing records to be submitted.

There hasn't been a definite decision on retention of the records, but it will not be indefinitely, as the GPhC only needs to keep them for regulatory purposes. You can transfer records from another platform and there is information on their websites and the GPhC's on how to do this.

Slide 25

There are lots of resources to support you with from validation on the GPhC website, including example records, frequently asked questions and templates. If you are a member of the Royal Pharmaceutical Society, they also have useful resources, and CPPE has a learning gateway on the topic which, again, provides useful resources.

Slide 26

There will be an opportunity to ask further questions on revalidation at the online workshops and in the discussion on Canvas. I hope this presentation has been useful to you.