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What is 360° or multi-source feedback?

360° is a process of gathering information about a doctor from a variety of useful colleagues and patients. This feedback helps promote continuous professional development as well as supporting clinical governance.

360° feedback for doctors provides information from clinical colleagues, other members of the healthcare team, trainees, managers and patients. When all the information has been collected and collated, it is fed back to the doctor to promote development and continuous improvement and provide a link to clinical governance.

[>> read more](#)

Going Global!

We have teamed up with Alexika, a translation business with specific expertise in the medical market, to develop our assessment products for customers and patients for whom English is not the first language.

This is proving particular popular for the patient feedback tool, of course, when Trusts need to be confident that their patients understand the questions asked of them and the answers they wish to provide.



Concern Over Low scores?

360° Clinical are often asked the question "when do we have cause for concern over low scores". The answer at the moment is that it is up to the Trust how they use the results in the report.

Although the Royal College of Physicians has validated the questionnaire, research has yet to be done on how many low scores indicate a potential problem. It may not be possible to prove this exactly as there are many scenarios, situations and different clinical indicators for each speciality

Welcome - Stuart

Welcome to the second edition of "360° Today" - the definitive guide to modern clinical 360° assessment in the UK.

With 160 Trusts on our system since inception in 2003, 360° Clinical is the market leader in 360° or Multi Source Feedback tools for the medical profession.

This newsletter contains the latest information on products, services and opinions that will shape the way we conduct appraisals.

Of course, we value your feedback and respect your time constraints so please do let us know if this communication is useful; you will always have the option to unsubscribe!

[>> email your feedback](#)

Revalidation - What it Means to You (the question we get asked most often!)

As the market leaders in 360 feedback for doctors nurses and healthcare professionals, we thought it might be helpful to our subscribers to give 360° Clinical's views on how the new Health and Social Care Act is likely to be interpreted and how it affects the medical community....

Why do we need Revalidation?

There are a number of reasons why Revalidation is important – and so timely. Following an ever increasing trend to ensure that the public has confidence in doctors, Revalidation establishes a far more robust and measurable method of demonstrating just how competent, qualified and compassionate the vast majority of clinicians truly are.

Furthermore, that tiny proportion of doctors that Revalidation shows to be potentially poor will be offered rehabilitation/remediation to improve their performance so that the bar is continually raised. Needless to say, those that are unwilling or unable to make the improvements required will be removed from the register – as they should be.

Patient feedback will be included as an important measure of performance, too, so the public have a real opportunity to make their opinions count.

Who's in charge?

While the GMC remains responsible for maintaining an accurate register of licensed doctors, there are several other interested parties involved:

- | The NHS Revalidation Support Team will be tasked with the design and implementation of appropriate assessment systems – and cascading updates to interested parties.
- | Responsible Officers and GMC Affiliates will be the support functions responsible for collating information relevant to Revalidation and cascading best practice so that the processes underpinning the framework are robust, reliable and consistent.
- | A joint GMC/AMRC group has been set up to work out how Revalidation will work at a practical level and will ensure timely communication across the professional bodies.
- | Key stakeholders such as the DoH, the BMA, the NHS and the private sector will need to understand and have faith in the training and support tools available to undertake Revalidation in an appropriate manner.

The approach is to be incremental – that is to say a slow build from solid (pilot) foundations that will allow the public to have absolute faith in Revalidation as a long-term healthcare strategy.

When will something happen?

that would need to be compared.

This analysis is on-going, however from working with many Trust's on this project, 360° Clinical have recognised that two or more "Below Average" or "Unacceptable" responses for any one question is unusual and could be used as a guideline for further questioning or investigation.

Until we have this extensive research it seems sensible for Trusts not to ignore an unusual significant cluster of two low scores in one question. It must be stressed that there is no evidence to support this at the moment, although we are working with Sheffield University to this end.

No Multi-Source Feedback or 360 questionnaire can be used solely to determine the performance of a doctor.

The 360 Clinical system does not guarantee that it will screen out all potentially poorly performing doctors.

Training Update

With many Trusts already comfortable with appraisal function and technique, we now offer a 90 minute "familiarisation" session to explain our product workings and suggest successful ways of implementation.

At a cost of just £500 for up to 15 delegates, this seminar has proved popular as a lunchtime or early evening event.

Revalidation Road Show

Would you like a speaker for your medical educational programme?

All you need to know about Revalidation & 360°s!

A hot topic for all doctors 360° Clinical would like to offer you the opportunity to make sure that all your staff know exactly what Revalidation means, what it requires, and all about 360° assessments as part of that process.

With all the latest developments, expertise and practical knowledge at our disposal, we will ensure that everyone will be fully up to date and informed about the biggest change to Medical Regulation since 1858.

A few Trusts have recently asked 360° Clinical would provide a speaker as part of their educational programme. We were wondering if other Trusts would be interested in this too? We are willing to visit and provide an interesting talk about this currently hot topic free of charge as this is all positive public relations for us.

360° Clinical are the UK's leading provider of multisource feedback to the medical profession. We are working with a number of Royal Colleges to design, pilot and run multisource feedback tools to link in with relicensing and recertification.

We would welcome the opportunity to inform your doctors what is going on and provide them with web sites and contacts to keep up to date with advances to the revalidation process.

Its started! Almost a half of all Acute Trusts nationally have started piloting doctor appraisal systems including multi-source feedback and many have already committed to a three-yearly cycle that ensure all their doctors are ready for Revalidation by 2010.

Questionnaire/system design is underway already and the subsequent workstreams around consultation, testing and implementation will follow swiftly on so that the new arrangements can begin in earnest by the end of next year.

Licences will be issued late in 2009 for those organisations that are ready for relicensure and the early adopters who have piloted the recertification element will be in a position to undertake full Revalidation in 2010 as the new legislation requires.

The 360° Clinical Revalidation Workshop

What the opinion leaders were saying...

- PDF Presentation by [Michael Wright, DoH](#)
- PDF Presentation by [Anne Gully, RCP](#)
- PDF Presentation by [Jo Anthony, Revalidation Support Team](#)



360° Clinical Managing Director at the workshop

Jo Parker-Swift addresses the workshop that attracted top speakers and delegates from across the healthcare profession.

Sounds pretty straightforward...

Yes it does....except that this represents the biggest shift in medical management since 1858...

While it sounds simple enough to devise systems and processes that will be able to carry out, record and track appraisal information from thousands of individuals, the greatest challenge will be the cultural shift to a climate in which all stakeholders including patients have a role in supporting doctor improvement.

Patient feedback will be a vital component of Revalidation, too. The recent legislation is clear that the best way for patients to be assured of professional healthcare is by having the opportunity to express an opinion on the service they receive. These views will be reinforced by the quality of the questioning tools that are used to appraisers and, while the GMC are set to establish the guidelines that such appraisal tools must follow – they will not approve any individual questionnaire.

What if I don't get around to doing this?

This entire exercise is intended to be supportive – a process that celebrates good medical practice and builds on the information gathered to establish an excellent reputation for healthcare experts.

It follows, then, that the legislation drawn up to withdraw the licence of any practitioner not complying with the Revalidation timetable will be robustly applied....

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Checks for all Doctors Move a Step Closer

Revalidation for all doctors moved a step closer today as the Chief Medical Officer (CMO), Sir Liam Donaldson, confirmed the formation of the implementation team for England and £1 million of funding to support them.

The team comprises a panel of senior doctors who will provide professionally informed leadership, support and advice to the NHS, patients and doctors representatives for the design and delivery of the process, ensuring that all doctors meet the standards expected of them

Speaking on the appointment of the team, CMO Liam Donaldson said:

"The news that the NHS Revalidation Support Team is now in place marks an important step forward in the process of introducing revalidation for doctors in England. Their expertise and experience will be a critical source of advice and support in making that happen. This is good news for the profession and good news for patients."

Maurice Conlon, head of the new team said:

"We believe that, for revalidation to work, organisations must step outside their normal boundaries. We are proud of our track record of building consensus and are enthusiastic about working cooperatively for the benefit of patients and doctors alike."

Supporting today's announcement, President of the GMC, Professor Sir Graeme Catto said:

"We look forward to working with the new Revalidation

If you would like to arrange a speaker to visit please contact our office: linos@360clinical.com or telephone 01732 471586.

Support Team on developing local processes and systems that will meet the needs of the medical profession, employers and patients and welcome their appointment."

And finally....

From all the team at

360° Clinical

*Season's Greetings
and Enjoy the
Christmas Holiday!*

*We look forward to
working with you in 2009*

The team will work closely with stakeholders and colleagues in Scotland, Wales and Northern Ireland to ensure that professionals, employers and commissioners of NHS services are involved in the design and roll out of the new processes.

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Operation Responsible Officer

Since the Health & Social Care Act July 2008 two words have more impact on a Trust or Employer than any others whenever Revalidation is mentioned: Responsible Officer.

This role has been created to provide the link between the Doctor and the GMC, via a local affiliate, primarily for Revalidation, but for regulation as well.

Organisations must now ensure that all suitable and appropriate systems and processes are in place so that a doctor has every chance and support to provide all the necessary information to revalidate. The Responsible Officer will be responsible for ensuring these systems are in place to record and collate all necessary information for revalidation and for maintaining a register of any concurrent practice. All doctors will be required to inform their responsible officer of all relevant clinical practice and failure to do so will be a fitness to practice issue.

We are still awaiting secondary legislation to finalise these responsibilities – consultation ended on 24th October.

The continuing debate is over who will take on the mantle of this role. It is generally assumed that the Medical Director will undertake this role, although some have concerns that it will be too onerous for an already burdensome position. Pilots are now underway to see how it can be put into practice. Help will be at hand from 360° Clinical with up to the minute information and our Revalidation Management System.

Who and when?

All NHS organizations will need RO's
Implementation from 1 October 2009 with a policy review 2011.

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