Q&A: Extended roles

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QUESTIONS

I am a GP with a Special Interest (GPwSI). How will I be revalidated?

Many GPs have areas of special interest or extended role in which they deliver care. If the care is delivered to the practice’s own patients and is a common activity (e.g., practice lead for diabetes) no extra supporting information is required. If the special interest is delivered within an NHS contract (i.e., the GP is contracted by their PCO as a GP with Special Interests (GPwSI)), that GP will need to describe their role and provide a certificate of accreditation. If, however, the special interest is not within an NHS contract, supporting information of appropriate skills before starting, keeping up-to-date, and the quality of care provided will be need to be provided. If an extended role is delivered for the registered list of patients within a practice then supporting information needs to be provided to demonstrate that the GP is up to date and fit to practise in all the roles undertaken. Further information can be found in the “Providing Context to What You Do” section of the RCGP Guide to the Revalidation of General Practitioners.

I work across two specialties (including GPs who also practise in other specialties). How will this affect my revalidation?

If you work across different specialties you will still ideally, where possible, have one appraisal, which covers all your roles as a doctor. This is known as a ‘whole practice appraisal’. The supporting information you bring to your appraisal should reflect the full extent of your work as a doctor and so if you work across different roles and specialties you should collect information to represent all aspects of your professional work.

Annual appraisal must cover the whole scope of your practice. Information and reviews from other areas in which you work should be presented as part of your annual appraisal for your RO (e.g. from another organisation where you do other pieces or types of work).

You may need to refer to the specialty specific guidance from different medical royal colleges or faculties; for example if you are working as a GP and as a specialist practitioner, you will need to take into account the requirements set out by both the Royal College of General Practitioners and the specialist Royal College, and your revalidation portfolio and appraisal will need to cover both areas of work. If you are on the specialist register but are now working only in primary care you will not have to provide information in relation to your specialty practice if you are no longer actively practising in that field. As stated, you will need to provide evidence for your primary care work.
**SCENARIOS**

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Like all doctors you will need to undertake annual appraisals and present evidence in the four GMC Domains. This evidence should be pertinent to all areas of your work over the five year cycle of revalidation. Your work lies between a generalist and a specialist but being on the generalist register your appraisal should be organised by the GP appraisal system.

I work in a Remote and Rural Hospital but am a GP on the generalist register. The Health Board/PCO have not provided appraisal for me as they cannot decide whether I am a GP or a Hospital doctor. How can I revalidate.

It is the responsibility of the Health Board/PCO to appraise all doctors in their area. You should write formally to the Responsible Officer asking for an appraisal to be arranged. If this does not happen write to the GMC.