

Appointment of Responsible Officer

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Executive Summary

Context

The current Responsible Officer (RO) for UHL is leaving the Trust. This paper proposes that Professor Peter Furness be appointed as RO in succession to Dr Peter Rabey, and continue as RO until a new Deputy Medical Director is appointed and trained to take over the RO post permanently.

Questions

1. Why is a new RO required?
2. Is Professor Furness a suitable individual to be RO for UHL?
3. How will the position be filled permanently?

Conclusion

1. The Trust has a statutory duty as designated body to appoint a RO.
2. Professor Furness is well placed to take on the role, but only wishes to do it to the end of March 2016. His appointment would require approval from NHS England and the GMC.
3. A new Deputy Medical Director will be sought and trained to take on the RO role. Trust Board will be asked to approve that appointment in due course.

Input Sought

The board is asked to approve the recommendations in the paper.

For Reference

Edit as appropriate:

1. The following objectives were considered when preparing this report:

Safe, high quality, patient centred healthcare	Yes
Effective, integrated emergency care	Not applicable
Consistently meeting national access standards	Not applicable
Integrated care in partnership with others	Not applicable
Enhanced delivery in research, innovation & ed'	Not applicable
A caring, professional, engaged workforce	Yes
Clinically sustainable services with excellent facilities	Yes
Financially sustainable NHS organisation	Not applicable
Enabled by excellent IM&T	Not applicable

2. This matter relates to the following governance initiatives:

Organisational Risk Register	No
Board Assurance Framework	No

3. Related Patient and Public Involvement actions taken, or to be taken: Not applicable.

4. Results of any Equality Impact Assessment, relating to this matter: Not applicable.

5. Scheduled date for the next paper on this topic: Before end of March 2016

6. Executive Summaries should not exceed 1 page. My paper does comply

7. Papers should not exceed 7 pages. My paper does comply

Appointment of Responsible Officer

Proposal for Change of Responsible Officer

1. Purpose of the Paper

This paper is to seek the Trust Board's endorsement of succession arrangements for the position of Responsible Officer (RO) following the planned departure of Dr Peter Rabey on 20 November 2015. It is proposed that Professor Peter Furness be appointed as RO for the University Hospitals of Leicester NHS Trust from 16 November 2015 and until the end of March 2016.

2. Background

The Trust needs to appoint a RO to replace Dr Peter Rabey, who was appointed as RO by the Trust Board on 30 October 2014. He is leaving the Trust to take up a position as Medical Director in Guernsey on 20 November 2015.

It is essential that the Trust have arrangements for continuity of the RO role.

At present Professor Furness is well placed to undertake the role; however he has recently retired and returned to work. He does not wish to take on the RO role as a permanent appointment, but is willing to be RO while a new deputy medical director is appointed and trained who can take on the role permanently.

Doctors with a license to practice have a prescribed connection to a designated body and relate to the RO appointed by the designated body.

The Department of Health in July 2010 produced guidance on the Role of the Responsible Officer (The Role of Responsible Officer; Closing the gap in medical regulation – Responsible Officer Guidance).

Responsible officers must have regard to this guidance under the Medical Profession (Responsible Officers) Regulations 2010. It relates to the role of responsible officers to be nominated or appointed by those bodies designated under the Medical Act 1983 (as amended by the Health and Social Care Act 2008). The regulations came into force on 1st January 2011.

The roles of the RO include:

- to protect patients by ensuring that the GMC's standards are met by licensed doctors;
- Ensure doctors are properly supported and managed in sustaining and, where necessary, raising their professional standards;
- For the very small minority of doctors who fall short of the high professional standards expected, ensure that there are fair and effective local systems to

identify them and ensure appropriate remedial, performance or regulatory action to safeguard patients;

- To increase public and professional confidence in the regulation of doctors.
- Provide recommendations to the GMC about the revalidation (or otherwise) of doctors with a prescribed connection to the designated body over a 5 year cycle.

The RO must be appropriately trained and participate in appropriate on-going RO training and development and have a Personal Development Plan related to the role of RO as part of annual appraisal.

The designated body has a statutory responsibility to provide the necessary resources to support appraisal and revalidation.

The University Hospitals of Leicester NHS Trust has a well-established and effective system for the appraisal and revalidation of its doctors. Annual reports of the performance have been provided to the Board. Currently the appraisal revalidation process is overseen by NHS England Regional Areas Teams who fulfil the role of the designated body for an RO.

The University Hospitals of Leicester NHS Trust is a designated body and currently its RO is the Deputy Medical Director Dr Peter Rabey. The Trust Board approved his appointment on 30th October 2014, when it also decided to separate the Medical Director and RO roles. It is important to emphasize that although UHL has split the RO and Medical Director roles, they continue to work very closely together.

The appointment of RO requires approval from NHS England and the GMC, who would be informed if the Board approve the recommendation in this paper. It is not anticipated that there would be any issues with the proposed arrangements.

3. Proposal

That UHL appoints Professor Peter Furness as its RO in succession to Dr Peter Rabey. It is proposed that the change take effect from 16th November 2015, to ensure seamless transfer; subject to NHS England and GMC approval.

Professor Furness has agreed to undertake the RO role, if appointed by the Board, until the end of March 2016.

It is proposed that before that date a new deputy medical director will be appointed in succession to Dr Rabey, and will undergo appropriate training to be appointed as permanent RO. The Board would be asked separately to approve that appointment in due course.

Professor Furness is currently UHL's Revalidation and Appraisal Lead, and so is familiar with all aspects of revalidation and appraisal; having been responsible for

setting up the existing arrangements and policy. He has undertaken RO training from NHS England, and actively participates in the East Midlands RO Network. He regularly takes part in meetings with the GMC Local Employer Advisor, Iain Whittle, together with the Medical Director and RO at which issues relating to revalidation are discussed. He also participates in monthly revalidation recommendation meetings with the current RO. He is thus a completely suitable person for the role.

4. Recommendation

The Trust Board approves the appointment of Professor Peter Furness as the RO for the University Hospitals of Leicester NHS Trust in succession to Dr Rabey, to take effect from Dr Rabey's departure until the appointment of a permanent RO before the end of March 2016.

If this recommendation is accepted then NHS England and the GMC would be informed of the change in RO in accordance with these arrangements.