

General Medical Council: Revalidation: The Way Ahead**Response by the Wellcome Trust**

June 2010

1. The Wellcome Trust is a global charity dedicated to achieving extraordinary improvements in human and animal health. We support the brightest minds in biomedical research and the medical humanities. Our breadth of support includes public engagement, education and the application of research to improve health. We are independent of both political and commercial interests.
2. We have a number of major concerns around the proposed measures for licensing for doctors who work abroad, as described in the frequently asked questions section. The issues facing doctors who work overseas have not been adequately addressed and need urgent consideration. The mobility of UK doctors is important to provide support for clinical care and research and to build capacity in low- and middle-income countries. From the Trust's perspective, these issues directly affect a number of Trust-funded doctors, including those working at our Major Overseas Programmes and UK Clinical Tropical Medicine Centres. While the consultation document does start to address the issues facing doctors who choose to work abroad, substantial further clarification is still required.
3. It is clear that the licences of doctors working abroad for a "short period of time" should not be compromised by the new processes since they will be able to revalidate as normal. However, greater clarity is required around what meant by a "short period of time" and the requirements for doctors who work abroad for longer periods than this.
4. The GMC recommends that doctors who are going to work abroad for longer periods of time relinquish their licence. However, in practice it is often necessary for these doctors to demonstrate their UK registration and fitness to practice in their new country of work on arrival, and periodically thereafter. It is therefore not possible for these doctors to relinquish their licences and in this situation it will be important to facilitate revalidation for doctors working abroad. This includes having clear mechanisms in place to allow doctors working abroad to link with a Responsible Officer in the UK. Under the current system, Wellcome Trust Major Overseas Programmes and UK Clinical Tropical Medicine Centres have developed workable mechanisms, including honorary UK clinical contracts; short stints of clinical practice in the UK; and annual appraisals, that enable doctors to maintain their clinical skills in UK settings and retain flexibility in their career paths. It is essential to ensure that there is also sufficient flexibility in the revalidation process to support these mechanisms.
5. There appears to be some provision for doctors who divide their time between working abroad and at home to revalidate. However, in the absence of greater detail we are concerned that doctors who return to the UK to practice for short periods, for example one month each year, may find that it difficult to ensure that this is seen to provide sufficient evidence for revalidation and to retain their licences. We urge the GMC to address these issues in more detail as part of its review.
6. We welcome the fact that the GMC will consult on the framework for revalidation of doctors in non-clinical roles later this year. We look forward to the opportunity to contribute since it is important that suitable processes are in place to support the revalidation of doctors working outside clinical practice, in particular those undertaking research.