



A dozen top tips on GP revalidation

1. Don't panic, the very vast majority of doctors will be revalidated with no problem. In the unlikely event of not succeeding at first you will be given a chance to upgrade your evidence.
2. Record your learning. We are all learning every day it's just that we don't write it down.
3. Don't leave it all until the last minute. (Bite- sized chunks)
4. Make your learning relevant and needs -based e.g. PUNS + DENS, learning needs assessments MCQs .etc.
5. Audit; keep it simple and complete the cycle. It is much easier and more effective to change one small thing, (e.g. Make sure all your diabetics are on a statin, then re-audit and prove a change) than to audit the whole care of all your diabetics; which generally just ends up as a data gathering exercise with no changes made.
6. Keep your PDP SMART (specific, measurable, achievable, relevant and timed)
7. The Impact of your learning (i.e. the change it makes to how you do your job) is far more credit-worthy than the Challenge of that learning.
8. Reflect on what you have learnt and how it may be applied to your work. One piece of well thought out learning is very valuable.
9. Enjoy what you are learning and know what your personal learning style is. That way you will retain more and find the whole process fulfilling, not a chore.
10. 'Variety is the spice of life'. Try different learning scenarios, workshops small groups, reading, conferences etc.
11. If it does go 'pear-shaped' (complaint, dreadful Multi Source Feedback (MSF)/360 degree) don't panic just put it right and tot up the impact points for next year's appraisal when you change your behaviour!
12. If you don't understand all this, go to one of the Family Doctor Association's revalidation workshops or lectures (although workshops are more credit-worthy!)

Top tips provided by Dr Claire Rushton, Vice Chairman, Family Doctor Association