

## **Revalidation for doctors working overseas**

### **Revalidation**

All doctors registered with a license to practice are required to participate in revalidation which is usually a five year cycle during which they need to collect a portfolio of supporting information and to participate in annual appraisal meetings, at which this evidence is reviewed. The doctor's designated body – which is usually their Trust – is responsible for arranging annual appraisals and also for making a revalidation recommendation about them to the GMC, which will be done by the responsible officer. A list of responsible officers can be seen on the GMC website at: [https://www.gmc-uk.org/media/documents/db\\_list\\_with\\_ro\\_details\\_\\_dc3503.pdf\\_52637845.pdf](https://www.gmc-uk.org/media/documents/db_list_with_ro_details__dc3503.pdf_52637845.pdf).

For doctors working overseas, it depends how long the placement will be. For shorter placements e.g. for voluntary work, this would be similar to having a career break for study leave, maternity/paternity leave etc. The following AoMRC FAQ is helpful in this respect:

### **Short periods working overseas**

***"If I take a short career break (e.g. maternity leave or working abroad), how will this affect my ability to revalidate?"***

Your ability to revalidate should not be affected if you take a short career break within a five year revalidation cycle. You will be expected to revalidate at the usual point in your five year cycle on the basis of the supporting information you have collected and appraisals that you have attended within this time period. If you have been unable to collect sufficient supporting information for your appraisal, your Responsible Officer (RO) may recommend a deferment of your revalidation to the GMC, in order to allow you to collect additional information.

It is expected that doctors will want to take career breaks within their revalidation cycle, and there is flexibility in the process to manage this. If you do plan a break you should manage your appraisals around that break as far as possible. A 'return to work' appraisal may also be required by your employer. Some of the supporting information is required over the five year cycle, not annually, so again this may be able to be managed around the career break. You should speak to your appraiser and RO to develop an agreed approach. It is advisable to try to keep your CPD in your clinical areas up to date even if you are not actively practising.

The Academy of Medical Royal Colleges Return to Practice Guidance gives more information on this." <https://www.aomrc.org.uk/reports-guidance/revalidation-reports-and-guidance/return-practice-guidance/>

### **Longer periods working overseas**

For longer periods working abroad, the GMC advises that the license to practice should be relinquished. This is a practical solution recognising that doctors working overseas won't be subject to the GMC's requirements and also recognising the difficulty in linking with a designated body which are all based in the UK. Another FAQ from the AoMRC is helpful here:

***"I am registered with the GMC and have a licence to practise, but I practise entirely abroad. How will I revalidate?"***

If you choose to continue to hold your licence while practising abroad, you will have to revalidate in the same way as doctors practising in the UK, and link to a UK designated body. If your employer or contractor is based within the UK it may be that they will be able to provide you with a link to a Responsible Officer, and you should discuss your revalidation with them at the earliest opportunity.

If you have not already done so, you should confirm your current circumstances with the GMC through your *GMC Online account*, so that the GMC can provide you with appropriate advice.

However, doctors who are based exclusively overseas do not need a license to practise in the UK. The licence to practise gives doctors legal rights and privileges in the UK that do not apply in any overseas country. Doctors who are based overseas must abide by whatever regulatory requirements exist in the country in which they practise.

You can relinquish your licence to practise whilst working abroad and reinstate it on return to the UK. Once your licence is restored, you would need to link to a designated body, participate in annual appraisal in the UK and provide supporting information in line with guidance. Any relevant information gathered while working abroad, as well as evidence of ongoing CPD, should be brought to your first appraisal on return to the UK.

*Relinquishing and restoring a licence are both applications that a doctor must make to the GMC."*

All doctors working overseas, whether or not their licence to practise has been relinquished, are encouraged to participate in CPD and the GMC protocol for Responsible Officers (ROs) making revalidation recommendations states:

*"2.3.2 Information from overseas practice or practice that does not require a licence: Doctors may practise in settings where they do not require a UK licence – for instance, they may work abroad, or they may undertake specific functions in the UK that do not legally require a licence to practise. Where this is the case, it is at your discretion whether you consider supporting information from these practice settings in making your judgement. You should consider whether such information is material in your evaluation of their fitness to practise, taking account of whether it is demonstrably relevant to the doctor's licensed UK practice and the proportion of the doctor's supporting information that it represents."*

### **Working overseas & wish to retain license**

If a doctor working overseas for a prolonged period still wants to retain their license to practice there are two other pathways available to revalidation for them apart from the designated body route mentioned above. The first of these is the 'Suitable Person' route, whereby the Suitable Person takes on the role of the Responsible Officer in making a recommendation about the doctor to the GMC. A list of Suitable Persons is available on the GMC website at: [https://www.gmc-uk.org/-/media/documents/Revalidation\\_\\_\\_Suitable\\_Person\\_details\\_\\_\\_DC4964.pdf\\_53912287.pdf](https://www.gmc-uk.org/-/media/documents/Revalidation___Suitable_Person_details___DC4964.pdf_53912287.pdf).

The second pathway is the revalidation assessment route, where the doctor must attend a MCQ exam at the GMC in Manchester, with further information at: <https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation/the-revalidation->

*and-decision-process-for-doctors-without-a-responsible-officer-or-suitable-person/why-you-need-to-take-the-revalidation-assessment.*

Neither of these alternate pathways (which are only taken by a minority of doctors who are subject to revalidation) negates the need to collect a portfolio of supporting information, which for doctors working overseas again points back towards the GMC's advice to relinquish the licence, and the RCoA advice to continue participating in CPD in all cases.

### **Further support**

The GMC has a list of approved suitable persons whom doctors can make contact if they are in a situation where they are working overseas. There is also a mechanism through which individuals can apply to become a suitable person, and therefore can provide assistance to anaesthetists in this situation. Further details can be found at: <https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation/connecting-to-a-suitable-person>