# **Important**

#### Key points to remember:

- Book your appraisal <u>within your allocated</u> <u>appraisal month</u> to prevent activation of the nonengagement process
- Inform the appraisal team <u>immediately</u> if you are experiencing problems in arranging your appraisal
- Make sure you sign off your post appraisal documentation <u>within</u> 28 days of your appraisal taking place
- Have a revalidation standard appraisal in each appraisal year
- Plan to complete your patient and colleague feedback in year two or three of your revalidation cycle
- Make sure your revalidation year appraisal takes place at <u>least eight weeks</u> before your revalidation date.

#### Please remember:

If you plan to retire you <u>must</u> continue to engage with the appraisal and revalidation programmes until you have relinquished your licence to practice and come off the national performers list.

Every appraisal forms part of your revalidation portfolio and you must meet the annual appraisal requirements set out by the GMC. There are exceptional circumstances where an appraisal may not be appropriate. An exemption to an appraisal can include, long term illness, maternity leave or sabbatical (this is not an exhaustive list). You should discuss your situation with your Appraisal and Revalidation administrator if you feel you should fall within the "exemption criteria".

Your Responsible Officer can refer a doctor to the GMC for non-engagement at any point in the revalidation cycle.

Keep the Appraisal Team updated with your personal and practice contact details. Out of date information will result in delays in providing you with appropriate information

# **Team members**

#### **Professor Aly Rashid**

Responsible Officer

#### **Dr Sarah Greening**

Appraisal and Revalidation Clinical Lead

#### **Dr Sophie Ellis**

Appraisal and Revalidation Clinical Lead

#### **ADMIN TEAM:**

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You should contact your geographical relevant administrator in the first instance.

#### MANAGEMENT TEAM:

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# NHS England Central Midlands (Midlands and East)

# **MEDICAL REVALIDATION**

The Appraisal and Revalidation Team is here to provide support and advice on all elements on the Annual Appraisal programme and Medical Revalidation.

#### Introduction

This leaflet is to help you prepare and manage your revalidation cycle to ensure you meet the requirements before your next revalidation submission date.

# When will my second revalidation submission date be?

Your second submission date will be five years after your Responsible Officer has submitted the first positive recommendation to the GMC.

#### Appraisal arrangements in your revalidation year

Please ensure that your final appraisal before your revalidation submission date takes place at least eight weeks before the submission date. Time is required by your appraiser to complete the documentation which then needs to be reviewed by your Responsible Officer. If your appraisal and revalidation submission date have less than an eight week gap, you run the risk of your appraisal not being completed in time for revalidation and a deferral being made.

You may be asked to move your appraisal to ensure your final appraisal can take place before your revalidation submission date.

## Patient and Colleague feedback (PSQ, MSF)

You will be aware of the challenges of completing patient and colleague feedback and the time it takes to complete.

NHS England Central Midlands are recommending you complete your patient and colleague feedback in years two or three of your revalidation cycle. This will give you time to complete additional work on the feedback should you need to or to manage any unforeseen delays in completion

# What supporting information do I need to present at my annual appraisal?

The GMC requirements for supporting information for appraisal has not changed. The RCGP has provided guidance on the kinds of evidence a GP can present at appraisal to meet the requirements.

## **Supporting information for Scope of Work**

Your Responsible Officer is required to submit a recommendation to the GMC for revalidation which

covers all the roles you hold as a doctor i.e. <u>Any</u> role where you are required to hold a Licence to Practise. The supporting information needs to include CPD, how you keep up to date including certificates relating to specific requalification training. If you are performing out of hours work, you still need to provide some evidence of quality and CPD. All areas must include reflection.

#### What is an SI for GPs?

An SI is a Serious Untoward Incident, something that is rare in the GP community. An SI is an event which did or could have caused harm to patients or staff or damage to NHS Property. These kinds of incidents will trigger a formal process such as that managed by NHS England. When being asked about an SI within the appraisal tool kits, most GPs will confirm they have not been involved in, or named in an SI. This is standard.

If you have a colleague that has dealt with an SI and you have identified personal learning, from it you can include this is as SEA in your own appraisal.

#### **Quality Improvement Activity**

Quality improvement activity can take many forms. It is activity that demonstrates a positive change to the way you work or how you treat patients. QI should include a selection of: Case based reviews/SEAs, personal audits, and formal audits.

#### Do I need to do a full audit?

The GMC requirement is simply evidence of you improving the quality of your practice. If you are required to perform an audit for another process such as the CQC, you can include this in your appraisal.

## **Appraisal years (Annual Appraisal)**

The appraisal year runs from April to March, this means that in order to meet the annual appraisal, the following rules apply:

- You <u>must</u> have one revalidation standard appraisal per appraisal year between 1st April and 28 February.
- You should ensure there is a gap of <u>no more</u> than 15 months between appraisals.
- You should ensure there is a gap of <u>at least 9</u> months between appraisals and not in the same appraisal year.
- Any predicted delay in having an appraisal should be discussed and agreed with the Appraisal Team to prevent activation of the non-engagement process
- Any delay in having an appraisal is discussed and

- agreed with the Appraisal Team
- Your post appraisal documentation is signed off and completed within 28 days of the appraisal taking place.

#### **Evidence**

From April 2016 <u>all</u> supporting evidence <u>must</u> be in an electronic format. Paper and handwritten evidence will not be accepted by your appraiser or your Responsible Officer

#### **Late Appraisals**

From April 2016 NHS England will begin recording any appraisal not completed by the last day of the allocated appraisal month as <u>late</u>.

Agreement to extend an appraisal deadline is required in writing from the appraisal office before the appraisal is due to take place. Retrospective agreement is not permitted.

#### Feedback about your appraisal or appraiser

Feedback about your appraisal experience is important to NHS England so we can continue to make improvements. You can do this via the Clarity toolkit feedback form or the link generated by our appraisal system (RMS). However, if you wish to discuss a concern about your appraisal or appraiser experience please contact the Appraisal Office and we will be happy to help.

#### **Further information**

Further information and guidance can be obtained via the following websites:

http://www.gmc-uk.org/doctors/revalidation.asp http://www.rcgp.org.uk/revalidation.aspx

The RCGP Guide to Revalidation for GPs can be found:

http://www.rcgp.org.uk/revalidation/new-revalidation-quidance-for-qps.aspx