**Exemplar appraisal summary**

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| Domain 1: Knowledge, skills and performance |
| You are a salaried GP, working 5 sessions a week; this has reduced from 6 sessions a week last year. You have an interest in teaching and have started to teach the practice registrars over the past year. You are practice lead for atrial fibrillation and stroke within QoF and you also support the practice manager in dealing with complaints. You balance your work commitments with family life.  **Last year’s PDP** – All 5 items were achieved. This included completing an audit, review of cardiology cases, collecting patient & colleague feedback, paediatrics update and management of changes at work relating to teaching and team meetings. You have reflected on your learning.  **Credits achieved** – 67 credits were claimed and agreed. Evidence was seen for the various learning activities, including certificates, logbook of topics identified in the consultation, notes from meetings with mentor, documentation of learning and associated reflection.  **Learning Methods** – You have demonstrated that you learn in a number of ways, from attending training events, practice meetings, on-line learning and discussions with colleagues. You also learn from PUNS & DENS, documenting areas of learning need in a log book and then recording when you have looked up the topic or discussed with a colleague. More complex learning you write up as mini case studies. You also meet with a GP colleague mentor every 2 weeks to discuss cases or areas of interest.  **CPD** – You have covered a wide range of topics which are relevant to your roles*.* These include a practice away day with a focus on team communication, general cardiology update course, practice meeting on cancer 2 week wait referrals, meeting about care of fragile elderly patients, self-directed learning on child protection issues and attending a half day symposium with talks on carers and technology in the workplace. As well as certificates uploaded to the portfolio, evidence was seen in the form of your log book of learning topics, PUNS/DENS etc. which was also bought to the meeting and reviewed.  **Reflection**– You have documented your learning and reflection. You have demonstrated that you are a reflective practitioner and able to demonstrate the impact of your learning on patient care. An example includes the management of a patient with end-stage MS whose management was positively impacted by your learning at an event on advance care planning. You arranged and delivered a training session for you colleagues on the subject.  **Audit / Quality Improvement Activity** – A review of children on the ‘Child Protection’ and the ‘Child in Need’ registers was carried out to determine if such patients were flagged on the clinical records. You also reviewed whether family members of these children were identifiable. The work was discussed with the local safeguarding nurse, senior health visitor and colleagues. Areas of confusion with identifying such children were discussed, changes were made to improve how these patients are flagged on the computer. Multidisciplinary discussion of vulnerable families now occurs at clinical meetings. The work is due to be discussed again at a meeting and then a formal re-audit carried out. However, due to changes already made, all children identified are now flagged appropriately.  **Case reviews** – Two case reviews were included, firstly a woman presenting on a number of occasions with severe headaches, secondly a young homeless man with significant social problems. Both cases were reflected on and discussed with colleagues.  **PUNS & DENS** –A number of PUNS & DENS were included and evidence brought to the appraisal in your clinical logbook. Cases were discussed with her GP mentor as well as self-directed learning. Reflection and learning points were noted. Topics included interpretation of spirometry, erythema multiforme, HRT prescribing and LARCS.  There are no outstanding investigations into performance. |
| Domain 2: Safety and quality |
| **Health & Wellbeing** We discussed work–life issues. You are reviewing the balance of your work and family life at the moment and considering your work plan for the future. You have a strong interest in education and this is something you would like to explore further. You have successfully started to teach the registrars at the practice this year and will discuss this further with your mentor. You report you have no health issues, are registered with an external GP and that you access healthcare through the normal channels.  **Significant events** – 2 significant events were included in this year’s portfolio.   1. A 70 year old man with a cardiac history presenting with chest pain, mostly settled by time of consultation. You assessed the patient and arranged an urgent out-patient appointment with appropriate safety netting. Patient presented next day with different symptoms and an abnormal ECG, referred to A&E with? MI. No complaint made, but the patient discussed management with another GP. You reflected that it would have been appropriate to arrange an ECG at the time of your assessment. 2. Patient with end stage Huntington’s whose family & GP agreed no further blood tests. Colleague then arranged a blood test as unaware of this decision. Apology to family & all discussed with colleagues and staff at home. No complaint made by family. Areas for change to practice agreed with colleagues.   **Life support training** – You attended a training session on basic life support last appraisal year.  **Child protection** – You have reviewed child protection guidelines as part of the research for your audit on child protection. You have also discussed issues relating to child protection with local clinical colleagues and have chosen to update your child protection skills in the coming year and this has been added to next year’s PDP. |
| Domain 3: Communication, partnership and teamwork |
| **Colleague and Patient feedback surveys** – These were both completed successfully with reflection. Comments from colleagues included “Excellent doctor and valued member of the team”, “Very good patient feedback”, “She has great empathy for the patient's” and “She works well as a team member”. Comments from patients included “She was very warm and understanding”, “She explained everything to me very well” and “I feel the Dr was acting in a professional and competent manner”. Time-keeping was your only area for improvement and we reflected that this could be helped with a slight re-jigging of the way your appointments are arranged and a clock opposite your desk.  **Informal feedback** – You brought cards to our meeting. Reflected on flowers from a patient’s relative who you cared for with terminal cancer.  **Meetings** - You found it difficult to get to practice meetings and therefore instigated a meeting with the other salaried GP’s in the practice to allow them to discuss cases or hot topics. You reflect that you work in a supportive environment and meet with your GP mentor every 2 weeks to discuss cases or areas of interest. You attended a practice away day (afternoon) looking at communication and strengths/weaknesses.  **Teaching & Training** –Your interest in teaching is clear and you have approached the partners at the surgery to request opportunity to teach the registrars attached to the practice. This has just started, and you are planning tutorials for them. |
| Domain 4: Maintaining trust |
| **Complaints** – No formal complaints since last appraisal. We discussed the requirement to document complaints and reflect on them.  **Probity** – A number of issues relating to probity were discussed, no concerns were identified. You have signed the probity statement on the Clarity toolkit. You use an accountant to manage financial affairs. You have no conflicts of interest.  **Medical indemnity** – You have appropriate medical indemnity cover. Issues relating to indemnity for GP’s in different roles were discussed. |
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| General Summary |
| You work 5 sessions a week as a salaried GP and reflect that you work with a supportive team.  You are aware of work-life balance issues and continue to consider your long term work plan which will include more teaching.  You have achieved more than 50 credits and demonstrate learning across a range of topics of relevant to your role. All of your learning is supported by reflective commentary, often generating ideas for change and development.  Your methodical and well-informed approach to appraisal has served well to prepare you for revalidation.  You have successfully completed all the items in last year’s PDP and we have agreed a SMART PDP for the coming year which focusses on your priorities arising from this year’s appraisal. Topics include child protection, interpreting ECGs, giving tutorials to registrars and a module on time-keeping.  \*Another useful and acceptable option here is to use this General Summary box to list as bullet points the appraisees key achievements (and outstanding requirements) with respect to revalidation requirements |