

22 September 2016
SENT BY EMAIL

Dear Doctor,

We are writing to share with you an update in respect of appraisal and revalidation.

Firstly, we are pleased to share with you the appraisal completion rate in the West Midlands for the 15/16 appraisal year, which stands at 99%, and would like to thank you for your co-operation in completing your appraisal. Unfortunately we do have a small number of GPs who were unable to complete their appraisal for a variety of reasons and where we are not aware of a valid reason we are in contact with the individual as per the formal non-engagement process.

Secondly, NHS England national policy strives to move appraisals in line with birth month to avoid a bottleneck at the end of the year. We have started to move our appraisals to birth month this year but there is no requirement to agree this. We would encourage co-operation with this change as it enables the appraisal workload to be spread throughout the year which ensures our appraisers are able to complete the majority of appraisals by the end of the calendar year, avoiding the log jam which has historically been created during January to March each year as doctors rush to complete their appraisals. If appraisals are moved we will ensure that we comply with the GMC guidance that there should be one appraisal per year between 9 to 15 months apart. We are allocating appraisals 6 months in advance, so when you receive your notification if you are unable to do your appraisal in the month allocated please let the team know by email on england.appraisal-westmids@nhs.net or call us on 011382 57193.

We would like to take this opportunity to remind colleagues that most doctors find it less stressful and more rewarding to collate their appraisal portfolio throughout the year and not leave it until the weeks leading up to appraisal.

Thirdly, In March 2016, the RCGP released a new Guide to Supporting Information for Appraisal and Revalidation. This guidance is aimed at simplifying and clarifying the information required for appraisal and revalidation.

We wholly support this guidance, much of which reflects the approach we have been introducing in the West Midlands for the last year. In practice, it should not result in much change to the information you have already been providing for appraisal. Some key points to bring to your attention are:-

- Impact- From 1st April it will no longer be possible to claim 'impact' and double the credits for CPD items. Instead, all time spent on learning activities which demonstrate the impact of learning on patient care can be credited. One CPD credit is 'one hour of learning activity demonstrated by a reflective note on lessons learned and any changes made as a result'. This can include activities related to quality improvement activity or reflection on significant

events, complaints or other forms of feedback, and only requires one reflective note per learning activity.

- Reflection - it is better to focus on quality rather than quantity when it comes to reflection. The RCGP recommend that you should provide a relatively small number of representative, high quality, documented examples of reflective practice at your annual appraisal, rather than needing to attempt to document everything. It is also not necessary to scan in certificates for every item – a certificate does not replace reflection - though you may of course continue to do so if you wish, e.g. to keep them in one place for your own records
- Significant events – There is some confusion about the need to include a certain number of significant events every year. The GMC's definition of a significant event is 'a serious or critical incident in which you were named or personally involved and in which serious harm could have or did come to a patient.' While these are relatively rare, all significant events meeting this definition must be recorded whenever they occur. Otherwise, it is appropriate to state that no such events have occurred.

Up until now, other significant events not meeting the GMCs definition (which may cover a wide range of clinical and non-clinical events and issues having impact on patient care) have been recorded as significant events at appraisal. Reflection on such events and any learning or changes as a result is of course still important, and can provide good evidence of quality improvement activity. We encourage you to continue to reflect on and record such events as part of your annual appraisal. These may now however more appropriately be recorded in the 'Quality Improvement' section.

Please do read the guidance – there is a summary document which highlights key changes and also the full guidance document – <http://www.rcgp.org.uk/revalidation/new-revalidation-guidance-for-gps.aspx>.

If you have any queries or concerns regarding the above please contact your appraiser or the appraisal team by email on england.appraisal-westmids@nhs.net

Best Wishes

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