KEEPING APPRAISAL SUBMISSIONS PROPORTIONATE
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There is an ongoing conversation to promote appraisal as a vibrant professional activity that supports professional development and provides the required assurance of practice whilst not being overly burdensome.

Responsible officers and appraisers should now be familiar with the materials supporting the ‘soft re-boot’ of medical appraisal that was launched in 2018-19. These are available via SharePoint or the email contact below. They comprise:

- Information Sheet 15: Minimising paperwork to maximise the benefit,
- Appraisal Preparation Guide - single sheet summaries for all doctors and for GPs, based on GMC requirements and guidance from the Academy and NHS England,
- Appraisal: making it count - a presentation to support discussion at network meeting.

Feedback indicates that the message is taking hold. Data are starting to show that doctors are finding their appraisals increasingly useful in shaping their professional development and indeed providing support at times of difficulty.

Responsible officers and their teams are encouraged to continue to adopt this approach.

Part of the challenge is to be proactive about identifying doctors who continue to devote excessive time and effort into their appraisal submission despite reassurances. It is not surprising, given the level of aspiration to excellence throughout the profession, that some doctors may need support to step away from a ‘high achieving over-provider’ pattern of behaviour.

As ever, the key objective at appraisal is to provide an opportunity for the doctor to describe their achievements, their aspirations and the challenges they face as they pursue these. The component assuring practice for revalidation purposes, although essential, is straightforward for most. The original pilots of revalidation showed that around ten items of supporting information is typically sufficient. As suggested in Information Sheet 15, appraisers should continue to reassure doctors that the benchmark for preparing for their appraisal is around 3-5 hours for a doctor who has been reasonably organised in gathering their information during the year. Assembling a small number of key pieces of supporting information is preferable to attempting to capture all their activities in every role each year – ‘quality over quantity’.

Appraisers should also consider whether over-submission is a marker for stress and burnout, just as much as under-submission or failure to engage. Either behaviour may therefore justify an enquiry into the doctor’s well-being at their appraisal.

This information sheet is relevant to all designated bodies in England.

These information sheets are written on an ad hoc basis, on issues of relevance to responsible officers and their teams, medical appraisers and doctors.

The latest version of all ROAN Information Sheets is available online via our SharePoint site. Contact england.revalidation-pmo@nhs.net for access.