Welcome to the latest edition of Revalidation Matters for NHS England, South (South West)

New Appraisers

We would like to extend a warm welcome to our new Appraisers who have recently completed their training and will begin to undertake appraisals over the coming weeks.

The new Appraisers are:


Thank you to those who have offered to ‘buddy’ the new Appraisers as they cover appraisals due from November through to February.

If you would like to offer your services as a future ‘buddy’ to our Appraisers, please let us know.

Each new Appraiser has been allocated a small appraisee list for this period, and will be included in the ‘Year 3’ Appraiser reallocation process for 17/18 to gradually increase their appraisee numbers during the next appraisal year.

Revalidation update

Please find below the 15/16 annual figures for Revalidation in the South West:

- Recommendation Made - 1083 (35.46%) of total number of doctors on list
- Recommended for Revalidation -1037 (95.75%)
- Recommended for Deferral - 44 (4.06%)
- Non-Engagement - 2 (0.19%)

A huge ‘thank you’ to you all for your efforts in achieving this - we have attained the highest percentage of successful Revalidation recommendations and the lowest number of deferrals across the South of England. Well done!
**Appraiser Support Meetings**

Can we remind you that all appraisers are contracted to attend 3 meetings per year - to include at least one locality and two regional meetings or vice versa. Please book a place now by contacting the appraisal team. A list of names of those booked to attend each meeting will be shared with appraisers so they can arrange to car share.

The next regional Support Meetings will be held as follows:

- **Tuesday 13th June 2017** – The Holiday Inn, Taunton (Vik Mohan session on resilience)
- **Wednesday 21st June 2017** – DoubleTree by Hilton, Bristol (Vik Mohan session on resilience)
- **Thursday 6th July 2017** – Lanhydrock Golf Club, Bodmin

- **Thursday 30th November 2017** – St Mellion, Saltash
- **Tuesday 9th January 2018** – Doubletree by Hilton, Bristol
- **Wednesday 24th January 2018** – Exeter Racecourse

These meetings will all run from 9am-1pm and will include a sandwich lunch.

Please note, we would recommend attending one of the summer meetings and one of the winter meetings as each group of 3 are repeats of each other.

To book your place at these meetings, which you can do now, please contact the admin team via email at: [England.gpappraisalsw@nhs.net](mailto:England.gpappraisalsw@nhs.net)

**Appraiser payments**

Please could you let us know if your GP role/status changes (e.g. Partner to Salaried, Salaried to Locum) as this directly affects the way in which we process your quarterly Appraiser payments and superannuation contributions.

**Combined RO statement on Simplifying Appraisal**

All RO’s in NHS England have agreed a statement to try and simplify GP appraisal including a reference to safeguarding and basic life skills. The statement link is at the very top of the appraisal website home page (whilst new) and also within the National Publications section which can be accessed via: [http://www.gpappraisals.uk/newsletters-and-publications.html](http://www.gpapraisals.uk/newsletters-and-publications.html)

**Minimum number of sessions/breaks from GP work in the UK**

We recognise that there will be circumstances where a doctor needs to reduce their number of clinical sessions for a period of time during an appraisal year and would ask appraisers to flag this in the summary and confirm how the doctor remains up to date and fit to practice. It is helpful to know if they have considered additional sessions for the following year, or if it is a planned reduction prior to retirement.

There are others who regularly work abroad or who carry out other clinical work who continue to do minimum sessions in the UK as a GP, for more than one year. *Pending further discussion at national level and a review, please identify the number of sessions worked and in what capacity if they are under 40 per year as a GP in the UK.* It is helpful if you can confirm a discussion relating to how they can assure the RO that the doctor continues to remain up to date and fit to practice. It does not preclude a GP working limited sessions, for up to a year, but will flag to the team for review at RAG.

If the doctor is taking time out of GP work due to ill health, maternity leave or for a sabbatical please ask them to inform the appraisal team. We can then confirm the period away from work and identify their next appraisal in a letter to them.

Please also advise the doctor to contact the appraisal team if they are planning on working abroad or reducing their sessions significantly for a year or more.
Appraisal for Appraisers who no longer work as a GP

Many appraisers are practising clinicians on the Performer’s list and will therefore be appraised with an NHS appraisal in this role. As part of this, you should include a review of all your roles including of course that as an appraiser. Your senior appraiser will carry out QA of a number of your appraisal summaries and send this to you, and also will carry out a review with you during the year – which may be a face-face formal review or one conducted via Skype, or email. Please liaise with your senior about this. If you are no longer on the Performer list and are still licensed you will also need to complete your full appraisal summary in order to be revalidated.

Some appraisers, however, have given up their clinical roles and are not on the Performer’s List. If you have relinquished your licence, or do not hold a license to practice you will need an appraisal (performance review) of your appraiser role annually.

A new Appraiser Review form has therefore been created to aid this review. It is based loosely on an NHS appraisal but is shorter. It uses the GMP domains to enable you to structure your review into CPD, QIAs, feedback from colleagues and appraisees, and to demonstrate that you are maintaining trust. It also contains a section for reflecting on complaints (if any) and a declaration concerning health and probity issues.

There is also a PDP for you to complete and PROGRESS2 for you to reflect on 2 or 3 of your appraisal summaries.

This appraiser review will generally be a face to face review usually lasting about an hour.

Please look at the form, if this applies to you, and we would welcome any comments on it.

Capita update

The appraisal team are working with neighbouring teams and HEE to try and identify all newly qualified doctors and those who wish to transfer into our area to ensure that they are on our system, linked to our RO, and are identified to have an appraisal. We can only apologise for the difficulties which you are experiencing and will do what we can to help.
Performance update

Many GPs are unaware of the governance role of NHS England for independent practitioners. This is mainly conducted by the South West Performance Advisory Group which follows the NHS England framework (copy on website) which requires that all concerns need to be discussed at PAG.

Concerns are raised primarily from the NHS England complaints process, GMC referrals, colleague concerns, and other sources.

All GPs who have been referred to PAG will be invited to provide a submission to support their case. In the more serious cases we make direct contact with the GPs for a meeting.

The emphasis is on understanding why the concerns arose and if there is any support or learning that is required. Less than 10% of concerns result in any formal sanction and even less in a GMC referral.

The appraisers have a vital role to help a GP who has been through the PAG process. 85% of PAG discussions are concluded with a discussion at appraisal.

We plan to ask the appraisee to present the original complaint, the response and any reflection for discussion. The discussion should include any impact of the process on the GP and to check they have demonstrated appropriate reflection and learning.

We believe this is the best way to address any deficiency of performance and also provide support to a practitioner.

It is also worth bearing in mind that there are also occasions when PAG address a concern and then vindicate the GP of any issue.

If you have any concerns that you think might need addressing then the team are happy to be contacted — our details are listed on the final page of this newsletter.

Dr Liz Thomas

Advanced Appraisal Skills course

Here is an opportunity for appraisers who want to advance and hone their appraisal skills, particularly to take on challenging appraisals, but also to maximise the potential for each appraisal. This is a one day course working with professional actors who have done extensive work with appraisers, and led by Susi Caesar (Appraisal Lead for Wessex and Revalidation Lead for RCGP).

We are running the same course on 2 consecutive days, and places are limited to 12 on each day, to be held on 22nd and 23rd March 2017.

Please contact the appraisal team if you are interested. Funding to cover one appraisal may be available as this is not part of annual training. Venues will be identified when we have an idea of where the appraisers are travelling from.

RCGP Revalidation Mythbusters document

Please find below the appraisals website link (under the National Publications header) signposting the RCGP Revalidation Mythbusters document which was published in October 2016.

http://www.gpappraisals.uk/newsletters-and-publications.html

The answers are in the Mythbusters document, but please contact the team if you need an answer sheet. Kindly note that some of the answers will change and some are not relevant to non NHSE southwest doctors.
**Clarity Appraisal Toolkit update**

Clarity have recently updated the Toolkit with the following functions:

**Early access organisation setting**

GP’s who use Clarity have the facility to give their appraiser early access for an unlimited period (or for a time specific period) before submitting their final evidence, to allow the appraiser to have early access and to provide suggestions or support to improve evidence for the doctors appraisal.

*Any Appraisee wishing to make use of this facility should contact the Clarity Helpdesk.*

**Appraisal overview at all roles**

A summary of the appraisal is now available to all roles. This lists the number of events and credits recorded but will not allow access to the details of the appraisal unless early access has been granted.

**Undergraduate education role – both option**

The undergraduate role in an educational appraisal can now be selected as both an SSC Supervisor and Regular teacher in the Clinical Teacher in LEP section.

Should you require any assistance, please contact the Clarity helpdesk directly on: 0845 113 7333 or via email at: doctors-appraisals-enquiries@clarity.co.uk

*Please also remember that it is the Appraisee’s responsibility to allocate their appraisal dates and to contact the Clarity Helpdesk to change their Appraiser*

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**GP Tools e-portfolio**

Kindly note that the *full summary* should be uploaded onto RMS as the current GP Tools ‘appraisal summary’ document alone does not provide a comprehensive overview of all evidence required/reviewed (e.g. previous appraisal, MSF, CPD). The summary looks quite similar in format to a MAG form once opened and a copy has been saved on our website.

*The full summary can be downloaded as follows:*

**For the appraisee:** in your Main Appraisal Form section, there is a link next to the total time spent called 'download MAG / CPD form'

**For the appraiser:** In the appraisee documentation: under the 'click to view' column, the fourth row has a link called 'MAG form'

The GP Tools Helpdesk can be reached via email at: support@gptools.freshdesk.com

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**FourteenFish appraisals toolkit**

If your appraisee has chosen to use FourteenFish, you will receive an email from the system once the appraisee has added your details to the toolkit.

You can then either log into your existing account if you have one, or register for a new FourteenFish account if not. This is a quick process, and there is no charge for appraisers to use the system.

Your account will then be automatically "linked" to your appraisee. Once the appraisee has completed their appraisal preparation and submitted it, you will then be sent a further email notification, at which point you will be able to see the full details of the appraisal via your account. Your appraisee can also give you "early access" to their appraisal preparation if they wish, meaning that you can see everything before it is formally submitted to you.

The FourteenFish appraisal toolkit follows a similar structure to the MAG form. There is more detailed information available at [www.fourteenfish.com/helpforappraisers](http://www.fourteenfish.com/helpforappraisers). You may also contact FourteenFish if you have any questions at all via: hello@fourteenfish.com or by phone on: 01794 231414.
Schemes for doctors thinking of taking time away from practice or leading up to retirement

If you do not undertake any GP sessions in England during a 24 month period, you will be required to undertake the GP Induction and Refresher scheme on your return – however, you may be eligible for the (quicker and simpler) portfolio route of return – more info here: https://gprecruitment.hee.nhs.uk/Induction-Refresher/Portfolio. This would have to be discussed in advance with HEE, in order for you to collate a portfolio of evidence during your time working.

Retained Doctor Scheme 2016 revised arrangements

This scheme aims to financially incentivise doctors thinking of leaving practice or those unable to work more than 4 sessions per week to stay on as a retained doctor. Retained doctors work between 1 and 4 sessions per week in clinical general practice. The financial package increases the practice payment for each session worked from £59.18 to £76.92 and introduces an annual payment to the GP (via the practice payroll) of between £1,000 and £4,000 depending on the number of weekly session worked. This increased funding is available until 30 June 2019. Payments for retained doctors joining the scheme after 31/3/17 and for current retained doctors when this scheme ends on 30/6/19 will be whatever is stated in the NHS England SFEs (statement of financial entitlement) at that time.

Tracy Ellis is the national NHS England lead for this scheme, please contact her if you have any questions or require clarification via email at: england.primarycareworkforce@nhs.net

The guidance, documentation and FAQs with HEE contacts can be found on the HEE website here: https://heeoe.hee.nhs.uk/retainer

Digital services, appraiser questions

Many appraisers have not yet had to discuss digital services with doctors they appraise. For those doctors who provide an online service the following points and suggested questions may be helpful. A copy will shortly be added to the website.

Quality Improvement

If appraisers are aware of good practice examples for quality improvement during the appraisal discussion, and the doctor is happy to share this for others to learn from the work they have done, please could you let the administration team know. We are looking for examples of good practice to share.

Booked appraisal dates

Could you please enter all booked appraisal dates onto the RMS once confirmed with the Appraisee.

If the appraisal will be taking place later than planned (e.g. maternity/sick/bereavement leave/sabbatical), kindly inform us as soon as possible. This will also stop the automatic reminder emails being sent out from RMS to the doctor when unnecessary. Thank you.

The New MAG—Version 4.2 (2016)

For a copy and guidance on changes of the new MAG form please use our website link: http://www.gpappraisals.uk/mag-form.html

Please can we also remind ‘MAC’ users who use the function ‘pages’ for word processing, not to upload documents as ‘pages’ onto their MAG forms. These cannot be read by anyone who doesn't have a MAC, and so are illegible for the appraiser.

Attachments to the MAG form should ideally be in ‘PDF’ format or ‘Word’ documents.
**Appraiser feedback and performance reports**

We recently sent out the first Appraiser feedback and performance reports which cover data and comments from appraisals completed between April to October 2016.

The collated responses from RMS are anonymised and will not be shared with anyone other than your senior appraiser and the appraisal administration team.

Currently only 30% of Appraisees have completed their post appraisal feedback. We would ask that you encourage your Appraisees to take a few minutes to complete the feedback request (which is emailed automatically to them from the RMS once the appraisal has been marked as ‘complete’) as this will form an integral part of your annual Appraisal or performance review with your Senior Appraiser.

We will send out the individual year end feedback and performance reports during March, and this will provide you with an overview of data and comments received during the 16/17 appraisal year.

We are also working closely with the national RMS team to develop a comparative data analysis report/tool which would be very useful to our Appraisers, as many of you have suggested. We hope to bring you news on these developments in the New Year and will inform you when these details are available.

**Appraiser changes**

As we head into 2017, we will bid a fond farewell to several of our Appraisers.

Please could we say a big ‘Thank you’ to Ian Bishop, Peter Foreman, John Heather, James Hill, Linda McHugh, Jonathan Rae, Colan Robinson and Shubha Sangal for their support and guidance over the years. You will be missed but we all send our very best wishes for your future.

**And Finally…..**

- Please check your Appraisee’s email address and let the admin team know if it needs to be updated on the RMS.

- If you have an Appraisee who you think would make a great Appraiser, please suggest the role — or ask them to contact the admin team to record an ‘Expression of Interest’ as we will be running annual recruitment campaigns

**Christmas cover**

*Kindly note that the office will be running on skeleton staff over the festive period (from 23rd December to 3rd January). May we take this opportunity to wish you and your families a very Merry Christmas and a Happy New Year.*
Please find below the contact details for all Medical Appraisal Team staff members:

# Medical Appraisal Team contact details

## Appraisal Leads:

Dr Peter Saunders - email: peter.saunders2@nhs.net or tel: 0113 824 7466

Dr Jill Millar – email: jill.millar@nhs.net or tel: 07928 322447

Dr Peter Wood – email: p.wood2@nhs.net or tel: 01647 433320 (work) or 07905 093877

## Appraisal and Revalidation Manager:

Lynne Bradshaw - email: lynne.bradshaw2@nhs.net or tel: 0113 824 8951 or 07976 961909

## Administration team:

**North:**
Generic email address: England.gpappraisalsw@nhs.net

Maria Campus - tel: 0113 824 7466/8129

Lesley Phillips — tel: 0113 824 8819

**South:**
Generic email address: England.gpappraisalsw@nhs.net

Lesley Phillips – tel: 0113 824 8819

Sarah Appleby - tel: 0113 825 3145

Vanessa White - tel: 0113 824 8806

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For any performance concerns, please contact

Dr Liz Thomas (Deputy Medical Director): liz.thomas2@nhs.net
Tracey Cubbage – Head of Professional Performance: tracey.cubbage@nhs.net
Emily Eason - Programme Manager for Performance: emily.eason@nhs.net

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