

Example welcome email

Dear Dr xxxx

Your appraisal is due in October/November/December/January and I am now contacting you to arrange a convenient date. These appraisals can be conducted face to face or remotely by using a video toolkit e.g. MS Teams or Zoom or something similar.

Can I suggest the following dates and times - xxxxxxxx
Of course, if these aren't suitable, we can look at other times also.

Appraisal toolkits - what you need to do

The appraisal format is somewhat different to previous appraisals. The new format should mean you need to spend no more than 60-90 minutes on appraisal preparation, unless you want to spend more.

You can start reviewing your PDP from previous year, reflecting on progress. The appraisal will be very focused on challenges you faced, achievements you had and your hopes for the future year.

We do not count CPD credits but please document 2-3 reflections covering your CPD activity, focusing on how the learning have impacted your own practice and safety of patients.

We expect at least 1 QIA activity for your main GP clinical role per year. If you have other roles which are not your main GP role, we expect at least one QIA per revalidation cycle covering those roles. A QIA documentation should include reflections focusing on how that activity shared with peers improved your practice, the practice of your peers and how it impacted on safety. Examples of QIA accepted by GMC can be found on the link:
<https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation/guidance-on-supporting-information-for-appraisal-and-revalidation/your-supporting-information---quality-improvement-activity>

You should complete the relevant section if you have been asked to discuss anything specific (by the Responsible Officer or GMC), or if you have completed Patient or Colleague feedback since your last appraisal.

Any complaints and SEAs must be discussed and reflected including lessons learned.

You will need to sign off the appraisal toolkit in the usual way and tick the appropriate health and probity boxes.

If you are working as a Locum GP please document the name of all surgeries where you have worked in the toolkit.

If you have worked less than 40 GP sessions in year or your scope of work is quite limited i.e.: working as GP in Minor injuries unit, SWAST, workplace is a GP surgery covering only university students, etc; you will need to complete the “Factors for consideration” template the Academy of Royal Medical Colleges. You can find the template on https://www.aomrc.org.uk/wp-content/uploads/2020/04/Factors_for_consideration_template_0420.pdf . If you are only doing this limited scope of work you must make sure that in your contract you are required to be a GP to carry out your job. If not, please discuss as soon as possible with myself or with the appraisal team to identify that your designated body is correct. You may need to be aligned to a different Responsible Officer and this is not the appraisal you should have.

GPs with extended role (GPwER) , previously known as GPwSI they must have in their contract that they only carry out their contracted obligations if doing sessions in primary care as a GP. For this GPwER we would expect reflections and submitted information related to this role i.e.: feedback, internal appraisal outcome, MSF and PSQ including peers and patients from this scope of work as well as CPD and QIA activities.

The main focus of this appraisal is supportive and developmental. Supportive for your wellbeing – including how you have coped in these extraordinary times, and indeed any personal health issues you may have encountered. If you feel you need additional support, I will be able to discuss this with you and give you some pointers of where to access this. We can also discuss your plans and aspirations for the coming year.

The discussion may well take the same time or even a little longer than previously, so please ensure you set aside at least 3 protected hours in case we need this. I will then complete the summary within your toolkit and ask you to approve it before signing the appraisal as complete. If this is your revalidation ready appraisal this will still apply, and we will make sure everything is in place beforehand to ensure you can revalidate with the GMC.

You can find more detailed information about appraisal on our Southwest website: <https://www.gpappraisals.uk/>

Confidentiality

Now the formal bit.

In line with NHS England standards, and the SW Appraisal Team, our appraisal discussion will be confidential; I will not share anything with work colleagues, patients, or the public without your consent. The only exception to this is if either of us mentions something that raises concerns regarding our own safety or fitness to practice in which case, we both have an obligation to report our concern in keeping with GMC good medical practice. What we write in the summary will be seen by a senior appraiser and parts may be reviewed by relevant persons in the appraisal team. Your appraisal forms may be viewed by the responsible officer should they deem it necessary for any reason, such as for the purpose of revalidation, or fitness to practice- this may be delegated to members of the appraisal or performance team.

I have access to a senior appraiser, as well as our appraisal team for support: if I have any queries or concerns, I am able to discuss these concerns confidentially with these individuals without making such concerns official.

Until your appraisal is complete, I keep appraisal records either on my personal password protected computer at my home, or my NHS password protected computer at work. I use either an encrypted memory key for data transfer or NHS.net email. Once your appraisal is complete, I will upload the appraisal documents to the NHS Revalidation Management System where it may be stored for up to 5 years. I will not keep a copy of your appraisal or your supporting documents; I delete such documents from all my sources, and shred or burn anything printed out.

If you have any questions regarding any of the above, please ask.

If you have any questions or issues before we meet, please do get in touch and we can discuss these beforehand.

I look forward to our meeting and completing your appraisal and I want to be able to support you in any way I can.