

# Appraisal & Revalidation

## Newsletter Issue No.4

### October'22



#### New appraisal format

The new appraisal format will be used going forward. **The template CAN NOT be used as a stand-alone document, an appropriate appraisal toolkit must be used.** We would encourage GPs to change to an electronic platform as these have all been updated to the new appraisal format.

We will maintain some flexibility over the next few months if you have already completed the 2020 format for an upcoming appraisal this will be acceptable for this appraisal year ( until end of March 2023) but would encourage any doctor whose appraisal isn't imminent to use the new format that will remain in place going forward.

#### MAG form

Regarding the MAG form:

- It is unsupported and will not be updated
- Is not fit for purpose
- There are more effective toolkits available that are easier to use and save doctors' time
- The expectation is that GPs who are using the MAG will transition to another toolkit and we are encouraging them to do so
- If a doctor is struggling to transition from the MAG, please discuss with them and if you are unable to address their concerns, contact the appraisal team.

If you have inputted most of your supporting information for this appraisal year we will accept the MAG form until appraisals on 31/03/2023. If you choose to utilise the MAG this year please ensure you are including the supporting information the 2022 format requires. If you have any concerns please raise them with your appraiser who can discuss further with you.

There are various discounts available for Fourteen Fish and Clarity and if you want to switch Fourteen Fish will transfer details from your MAG to their toolkit ( <https://www.fourteenfish.com/switch> )

#### Patient and Colleague feedback

Please encourage doctors to carry these out early in the revalidation cycle (Year 1-3) and document this. Leaving it until the final year causes issues with appraisal dates and revalidation as the results must be discussed in an appraisal. If results are not ready to discuss in the pre-revalidation appraisal, please contact the team prior to the appraisal who will discuss a postponement of the appraisal within the appraisal year to facilitate this.

When you are uploading the appraisal to RMS, please ensure that:

- The survey results are visible
- The survey used is noted in the RMS output summary

Discussion of results of MSF & PSQ should take place within an appraisal in line with GMC guidance, it is only in exceptional circumstances that discussion outside an appraisal will be accepted and this must be agreed in advance by the appraisal team. If results are not available by the pre-revalidation month, please contact the appraisal team if postponing the month of appraisal within the appraisal year would enable the results to be discussed at the appraisal. A revalidation deferral because of missing MSF and PSQ results is requiring increasing amount of work from the appraisal team and the doctor concerned as there needs to be a clear plan in place to reassure the GMC.

#### Fourth Appraisal requests

These are only in exceptional circumstances and require sign-off from the appraisal office. The request also should bear in mind two appraisers are required in one revalidation cycle.

## Conflicts of Interest

It's very important to reassure our doctor colleagues that we respect their privacy and the value of appraisal, but not looking at their appraisal material. If you have any concerns, please contact the appraisal team.

If a significant issue with the doctor/appraiser and they work with/know your senior well, then there is obviously a COI and the senior will never check the appraisal. In these cases, if non-urgent advice is needed please contact the appraisal team who will get another senior to advise you. If urgent advice is needed, please contact Lynne Bradshaw or one of the appraisal leads.

No allocations should occur between appraisers in the same locality group and if they do, the appraiser should ask the appraisal team to arrange a re-allocation.

## Pre-revalidation Appraisals

Please check your lists for doctors' revalidation dates, if you are carrying out the last appraisal before revalidation please ensure:

- the appraisal is arranged at least 2 months in advance of the revalidation date to enable the write up to be signed off, uploaded and revalidation checks to be done in time.
- the doctor has previously completed their MSF and PSQ and discussed at an appraisal and if not send a reminder to start them now
- when uploading the appraisal write "appears revalidation ready" in the RMS output summaries

### Revalidation Check

The revalidation readiness can be reviewed by the office team rather than Senior Appraisers which will free up some of their valuable time. Do please continue to flag if you feel there could be any administration issues that would affect revalidation readiness, many thanks as always.

## Low volume of work/limited scope

Please start using the "factors for consideration" template, this replaces the "low volume work" template which was previously used. If a doctor has a limited scope of work, please explore how they would update and ensure patient safety if they were to increase their scope of work.

Please flag any doctor completing this template to your senior so they can check the appraisal write-up. Please see below the link to the new form: [Factors\\_for\\_consideration\\_template\\_0420.pdf \(aomrc.org.uk\)](https://www.aomrc.org.uk/factors_for_consideration_template_0420.pdf)

## Follett appraisal for Academics

This has changed, although the principle remains in the new appraisal format and the toolkits should still have a box regarding whether a Follett appraisal is required. There is no longer a need for the whole scope of work appraiser (in our case the GP appraiser) to meet with the academic appraiser and the doctor. The academic appraisal should take place first. You will then carry out the whole scope of work appraisal after the academic appraisal has been carried out – the outputs from the academic appraisal MUST be included as supporting information for the whole scope of work appraisal.

## Pension Changes

Following consultation, there has been a small change to the pension tiers. It only relates to the lower tiers and so may not impact too much.

## Appraisal Sign-Off

National requirement for upload to RMS is 28 days – reminder emails are issued if not completed by this deadline.

## Website

We are pleased to tell you the website has been updated and new resources added.

Check it out and see what you think: <https://www.gpappraisals.uk>

## Revalidation

The GMC have now altered their revalidation notice period to 12 months, for all notifications after 12 April 2022. You should all receive an email from the GMC to the email address you gave the GMC serving you notice. The intention is to be more flexible and to ensure that you have **all** of the required evidence completed in time for your last appraisal before revalidation. There has been a significant increase in MSF and PSQ not being completed in time for the last appraisal before revalidation, hopefully earlier notice to remind you of your revalidation date will help you plan and complete all evidence required in time for your last appraisal.

Once your last appraisal is completed and your evidence has been reviewed by the Responsible Officer, a recommendation to revalidate can be submitted to the GMC at any time during this 12 month period. Once approved by the GMC your new revalidation date will be 5 years forward from your current revalidation date, there will be no detriment in revalidating early.

**If you are needing advice regarding an appraisal or revalidation issue, please contact your senior appraiser in the first instance who will escalate if needed.**

## Locum GP Appraisers - Important Update

### Locum A Forms (to cover the recent Appraiser fee uplift only)

We have been asked that each of our Locum GP Appraisers who received the arrears payment relating to the uplift backpay, completes a separate Locum A Form (just to cover the one-off payment). The unique Locum A Form will need to be submitted using the following format please:

- normal Locum A Form processes should be followed for normal appraisal payments (i.e. full appraisal fee) - for back-pay only one Locum A Form should be submitted for the total of the back paid amount. This form needs to have the activity date of 01/04/2022 to 12/09/2022. It should also have the following reference number:

**SD Number (pension scheme number)/APP/MONTH TO AND FROM (e.g. Apr-Sep)/YEAR.**

**This would be an example: 12345678/APP/Apr-Sep/2022**

Please continue to send your completed Locum A forms for signature to Angelo Contardi in the Finance Team via: [robertangelo.contardi@nhs.net](mailto:robertangelo.contardi@nhs.net)

### Important update about Locum A Form submissions via PCSE from 1<sup>st</sup> October 2022:

**From 1<sup>st</sup> October, all Locum A Forms (for any GPs, not solely GP Appraisers) will need to be received by PCSE no later than 10 weeks from the date that the last appraisal took place in that month.**

Any Locum A Forms received after the 10-week period will not have the pension contributions attributed to the doctor's pension pot, and will be rejected by PCSE.

### PCSE portal update for upload of Locum A Forms – w.e.f. end October 2022

The PCSE portal where GP Locum Appraisers can upload their Locum A Forms directly is being re-activated from the end of October 2022 via this link: [Submit Locum A and B Forms - Primary Care Support England](#).

There are also useful 'how to' webinars and short videos to guide the Locum GP Appraisers with this revised system. In summary, the Locum GP Appraiser will upload their current month's Locum A Form and select the 'RMS' tab for submission (not the 'Practice' one). This will generate a notification alert to the nominated approver (for the SW it will be Angelo Contardi from Finance in the first instance). The approver can then approve or reject the Locum A Form (there will be a free text box for the rejection reason). Where the form is approved it will generate a completed Locum A Form which will be sent to the Locum GP Appraiser to accompany their Locum B Form and contributions to PCSE.

If the form is rejected, the Locum GP Appraiser will need to submit a new form with the requested details included and upload it again, using the 'RMS' selection key.

There has been no formal 'stop' date released as yet for those Locum GP Appraisers who wish to submit their Locum A Forms manually – we will be kept updated of any changes.

## 2023/24 Appraiser/Appraisee allocations

The admin team will be contacting all Appraisers during October to check their Appraiser role plans from 1 April 2023 (e.g. months available, maximum appraisee numbers, areas covered, payment or clinical/role changes). Please take some time to consider what your plans for the next appraisal year might look like, the admin team will compile your 2023/24 appraisee lists accordingly once we have heard back from you.

## Regional news and updates

### Update on Devon GP wellbeing pilot

As you all hopefully know, the aim of this pilot programme is to better identify and support doctors under stress, before their health or performance is impacted. The GP wellbeing pilot for Devon is now well underway; many thanks to those of you who are referring GPs for additional support.

The key message from us is that by being willing to talk about the doctor's wellbeing, and by creating a safe space within the appraisal where the doctor feels listened to and their experience is acknowledged and normalised, we believe that doctors are more likely to share with you any difficulties they are experiencing.

We have secured funding for additional support for GPs under this pilot. As well as all of the existing support services, you can now signpost doctors to:

- A confidential wellbeing focused discussion with a wellbeing appraiser
- Wellbeing focused coaching from the LMC
- Facilitated peer support groups
- Mindfulness training

If you identify a doctor at appraisal who would like to access additional support, all you need to do is email us on [selma.hussain2@nhs.net](mailto:selma.hussain2@nhs.net) with the doctor's name and email address, stating what support they would like to access. Please also tell your appraiser that they will be sent a questionnaire for their (anonymised) feedback on their appraisal and on the support they've received. We've attached a simple two-page guide that contains information about the additional support available.

If at any time in the coming year you would like to discuss how best to support a GP you're appraising, or where best to signpost them to, please email Vik Mohan on [vik.mohan@nhs.net](mailto:vik.mohan@nhs.net). As always, your senior appraiser is also there to support.

This pilot is the first of its kind and we will be evaluating the impact of this pilot over the coming year. For the pilot to work, we need your help: we want you to continue providing the high quality, supportive appraisals that you have always provided; we want you to signpost GPs to the additional support if they need it and when the time comes we want feedback from you.

### BNSSG GP Wellbeing Pilot

Working as the GP Retention Fellow for the BNSSG Training Hub, I am in the preliminary stages of implementing a pilot scheme to improve job satisfaction, wellbeing and clinical hours worked amongst GPs who are seriously considering leaving medicine or who have already left due to things like stress and burnout.

We are planning on running a series of facilitated peer support group sessions designed to be attended by a small group (approx 10) of GPs over a period of six sessions every 3 to 4 weeks starting in January 2023. I am at present in the final budget planning and design stages and will soon be looking for a facilitator to run the sessions for the pilot. I welcome any feedback or suggestions to [andrew.hunter17@nhs.net](mailto:andrew.hunter17@nhs.net)

## One Designated Body (DB) move

The national team is moving towards the merger of all three current DBs in the South West into one team. This will include the GMC amalgamating their lists and RMS replicating this – likely to be from 1<sup>st</sup> April 2023 and we will keep you posted on developments as we receive them.

**The other consequence of this merger, is that from Monday 17th October, all appraisal communications will go via one generic email address: [england.gpappraisalsw@nhs.net](mailto:england.gpappraisalsw@nhs.net)**

Kindly note that all emails sent to the current BGSW ([england.gpappraisalswn@nhs.net](mailto:england.gpappraisalswn@nhs.net)) and Dorset ([england.gpappraisalswd@nhs.net](mailto:england.gpappraisalswd@nhs.net)) generic email addresses will be redirected to the new email address above for a short time.

All members of the admin team will be able to access the new email address and help with any queries from Doctors/Appraisers/Performers List teams going forwards.

## Future Dates

### Catch-up Sessions

18 January 2023 – 9.00-12.00

20 February 2023 – 14.00-17.00

**The above dates are only for those appraisers who were unable to join any of the Summer 2022 updates which contained a dedicated section on coaching from Vik Mohan.**

**Meeting invites for these sessions with the TEAMS link will be sent out in the coming weeks.**

### Regional Meetings

17 April 2023 – 9.00-13.00

2 May 2023 – 13.00-17.00

14 June 2023 – 13.00-17.00

22 June 2023 – 09.00-13.00

**The format of these meetings (e.g. virtual or face-to-face) will be agreed in advance and TEAMS links/venue details will be shared nearer the time.**

**All Appraisers should please pre-book their places on the regional support meetings via RMS.**

### New Appraiser Recruitment for 2023/24

End of January 2023—Advert to be sent out to all doctors

End of February 2023—Shortlisting

March 2023—Interviews will take place (dates/time to be confirmed)

26-27 April 2023—New appraiser training (virtual or face-to-face to be confirmed)

## Medical Appraisal Team Contact Details

**Responsible Officer: Dr Kheelna Bavalia**

**For any performance concerns, please contact: Head of Professional Standards - Iona Neeve - [iona.neeve@nhs.net](mailto:iona.neeve@nhs.net)**

**For Appraisal/Revalidation (& HLRO Manager) – Lynne Bradshaw - [lynne.bradshaw2@nhs.net](mailto:lynne.bradshaw2@nhs.net) - 07976 961909**

**Appraisal Lead - Lowri Kew - [l.kew@nhs.net](mailto:l.kew@nhs.net) - 07769 189290**

**Deputy Appraisal Lead: Anisio Veloso - [anisio.veloso@nhs.net](mailto:anisio.veloso@nhs.net)**

**HLRO Project Officer - Sarah Strong - [sarah.strong@nhs.net](mailto:sarah.strong@nhs.net) - 07730 371076**

### **Appraisal admin team:**

**Kate Barnes - 07730 379685**

**Vanessa White – 07730 379680**

**Grace Adams - 07783 817108**

**Helen Ashworth - 07730 376201**

**Hayley Colledge - 07900 713005**

**Penny Giles - 07730 381863**

**Sam Green - 07450 884022**

**Selma Hussain – 07730 371228**

**Deborah Lewis - 07702 436069**

**Tamsin Perrin (was Wall) – 07702 403674**

**Gemma Woods - 07860 180444**

Any of the above team members can be reached via the new generic email address:

[england.gpappraisalsw@nhs.net](mailto:england.gpappraisalsw@nhs.net)

