



Revalidation Support Team

Quality Assurance of Medical Appraisers

Engagement, training
and assurance
of medical appraisers
in England

Appendices

Contents

Using these appendices in the context of an appraiser's model of engagement	3
Appendix 1: Core elements of a specification for medical appraisal	4
Appendix 2: Medical appraiser specification	6
Appendix 3: Competency framework for medical appraisers	9
Appendix 4: Medical appraiser competency self-assessment tool	15
Appendix 5: Sample medical appraisal feedback questionnaire	18
Appendix 6: Methods of assessment of medical appraisers	21

Using these appendices in the context of an appraiser's model of engagement

As detailed in *Quality Assurance of Medical Appraisers: Main document* (NHS Revalidation Support Team, 2014), appraisers are normally engaged by one of three models:

1. on an employment basis
2. as an individual independent contractor
3. by commissioning their services via an external provider.

For each model, important differences apply; in all cases the aim is to arrive at a consistent level of quality of medical appraisal, regardless of the model of engagement. In general, where the appraiser is employed by the designated body, the responsible officer will directly lead the performance review, supervision and support processes. Where the appraiser is engaged either as an independent contractor, or via an external provider, the responsible officer retains statutory responsibility for the appraiser's outputs, but will discharge this by setting the specification for the services provided by the appraiser either directly with the appraiser or with the external provider. The following appendices may need to be interpreted in the context of the relevant model.

Appendix 1

Core elements of a specification for medical appraisal

To assure quality and consistency the specification for all medical appraisals should include core elements which relate to the medical appraiser. Some additional elements, however, may need to be determined by the responsible officer. The following is an example:

The specification of the medical appraisal to be provided includes clear description of the following core elements in relation to the medical appraiser:	
1	Key accountabilities, including accountability to the responsible officer
2	Communications and key working relationships both inside and outside the designated body (for example: medical director/responsible officer, appraisal/revalidation lead, appraisal manager, clinical directors, service leads, postgraduate tutors, royal college advisers, other medical appraisers, doctors being appraised)
3	Purpose and key responsibilities of medical appraiser (including availability to provide an appropriate range and number of appraisals)
4	Adequate pre-appraisal preparation in line with principles from the medical appraiser training and local and national guidance
5	Capability and commitment to conduct the appraisal interview in line with principles from the medical appraiser training and local and national guidance, including: <ul style="list-style-type: none"> • agreeing an agenda with the doctor to include an appropriate balance of personal, professional, local and national objectives • building a positive working relationship with the doctor • supporting the doctor in reviewing practice over the last year, including lessons learned, celebrating good practice and promoting quality improvements • agreeing objectives and a new personal development plan with the doctor • agreeing a summary of the appraisal meeting
6	Completion of post-appraisal documentation in line with current local and national guidance and quality standards in a timely fashion

7	Duration of engagement as a medical appraiser (for example, description of arrangements for periodic renewal or formal extension of terms of engagement subject to a satisfactory review/assurance process)
8	Requirement to have completed appropriate initial medical appraiser training and demonstrate core competencies prior to engagement and provision of medical appraisals
9	Probationary period or provisional engagement subject to satisfactory assurance of outcomes
10	Participation in ongoing support and development to address development needs as a medical appraiser to include: <ul style="list-style-type: none"> • minimum continuing professional development to be completed each year • minimum requirement to work with other appraisers/appraisal lead to ensure consistency of quality • participation in update training • completion of any agreed personal development plan items related to being a medical appraiser
11	Participation in reflection on the feedback from doctors being appraised
12	Participation in performance review as a medical appraiser
13	Participation in the management and administration of the appraisal system, to include reporting the progress and completion of allocated appraisals
14	Participation in arrangements for quality assurance of the appraisal system
15	Confidentiality of appraisal process and specific circumstances in which confidentiality should be breached. This should describe the process to be followed where there are early warning signs that a doctor may require support or early intervention and where concerns regarding a doctor arises within the appraisal
16	Local recruitment policies and procedures, for example: compliance with health and safety policy, equality and diversity policy, information management policy

Appendix 2

Medical appraiser specification

The medical appraiser may undertake appraisals as an independent contractor or as an employee. Sometimes medical appraisal is an integral part of a wider medical management role (such as clinical director or head of service). To ensure quality and consistency the specification for all medical appraisers should include similar core elements. The final content, however, is to be determined by the responsible officer as appropriate for the context of the medical appraisal.

The following table is an example of a specification for a medical appraiser:

Core elements of a specification for medical appraisers	
<p>No distinction has been made between 'essential' and 'desirable' as the importance of each of these qualities should be determined by the responsible officer, in relation to local context.</p> <p>Probationary periods or provisional engagement/appointment subject to satisfactory completion of training and/or demonstration of competence should be described in the specification.</p>	
Qualifications¹	<p>Medical degree, plus any postgraduate qualification required</p> <p>GMC licence to practise</p> <p>Where appropriate, entry on GMC specialist or general practitioner register</p>
	<p>Consider for general practitioners: entry on medical performers list</p>
	<p>Consider: satisfactory completion of initial medical appraiser</p>

¹ See Section 4 of *Quality Assurance of Medical Appraisal: Main document*. "In most instances the appraiser will be a licensed doctor with knowledge of the context in which the doctor works. This is particularly important for doctors in clinical roles. However, doctors work in many different roles and settings and there are situations where it may be more appropriate for the appraiser to be from a non-medical background. The GMC has made clear that to satisfy the requirements of revalidation, appraisers do not need to be licensed doctors and that local decisions should determine the overall suitability of the appraiser workforce, but it is essential that both the doctor and their responsible officer have confidence in the appraiser's ability to carry out medical appraisals to the required standard."

Core elements of a specification for medical appraisers	
	training (this may not be a requirement prior to appointment but would need to be completed before appraisals are performed)
Experience	Experience of managing time to ensure deadlines are met
	Experience of applying principles of adult education or quality improvement
	Consider: has been subject to a minimum of three medical appraisals, not including those in training grades
Knowledge	Knowledge of the role and responsibilities of medical appraisers
	Knowledge of the purpose and process of medical appraisal
	Knowledge of the principles of revalidation
	Knowledge of educational principles and techniques which are relevant to medical appraisal ²
	Knowledge of responsibilities of doctors as described in <i>Good Medical Practice</i>
	Knowledge of principles of clinical governance, evidence-based medicine and clinical effectiveness
	Knowledge of the health sector in which appraisal duties are to be performed (primary care, secondary care, mental health, independent sector)
	Knowledge of relevant local and national healthcare context
	Knowledge of local professional development and education structures
Understanding and application of principles of equality and diversity	
Understanding and application of principles of information governance	

² Knowledge of educational principles and techniques which are relevant to medical appraisal may be taught at initial appraiser training and need not necessarily be present at the time of application to become an appraiser.

Core elements of a specification for medical appraisers	
	Understanding and application of legislation and guidance relating to data protection and confidentiality
	Consider: knowledge of relevant speciality-specific elements, including continuing professional development requirements and quality improvement activities
Core elements of a person specification for medical appraiser	
Skills	Motivational, influencing and negotiating skills
	Good oral communication skills, including active listening, the ability to understand and summarise a discussion, ask appropriate questions, provide constructive challenge and give effective feedback
	Good written communication skills, including the ability to summarise clearly and accurately
	Objective evaluation skills and ability to develop professional judgement calibrated with peers
	Adequate computer skills– this may include familiarity with web-based appraisal support systems
Attributes	Highest levels of personal integrity, personal effectiveness and self-awareness
	Motivated, enthusiastic, positive role model
	Ability to adapt behaviour to meet the needs of the doctor
	Commitment to ongoing personal education and development
	Good working relationships with professional colleagues and relevant stakeholders
	Ability to work effectively in a team

Appendix 3 Competency framework for medical appraisers

The core competencies for medical appraisers are summarised in the table below:

Competency framework for medical appraisers		
1	Professional responsibility: to maintain credibility as a medical appraiser	
	Competency	Behaviour
1.1	Maintains high standards of professional responsibility, personal integrity, effectiveness and self-awareness	<ul style="list-style-type: none"> Maintains high professional credibility Acts as a champion and role model for appraisal and revalidation Demonstrates insight and self-awareness Declares conflicts of interest
1.2	Develops professional competence as a medical appraiser	<ul style="list-style-type: none"> Undertakes appropriate continuing professional development reflecting development needs in their personal development plan Reflects on performance and calibrates practice with other appraisers, making changes to maintain consistency of standards Reflects on feedback and makes appropriate changes in behaviour Supports efforts to evaluate and improve local systems and processes

Competency framework for medical appraisers		
2	Knowledge and understanding: to understand the role and purpose of the medical appraiser in order to be able to undertake effective appraisals	
	Competency	Behaviour
2.1	Understands the purposes of appraisal and revalidation and understands the role and responsibilities of the medical appraiser	Demonstrates understanding of the purpose of appraisal and revalidation Works within the limits of the medical appraiser role and responsibilities, setting appropriate boundaries and referring for advice and guidance from the clinical appraisal lead or responsible officer as appropriate
2.2	Understands quality and safety systems and relates this to the context of the doctor's work	Applies knowledge of quality and safety systems to appraisal Adapts approach to the work context of the doctor
2.3	Understands relevant legislation and guidance including equality and diversity, bullying and harassment, information governance, data protection and confidentiality	Maintains knowledge of relevant policies and legislative frameworks and applies the principles in practice Demonstrates fairness and equality and makes allowance for diversity Always deals with confidential data in accordance with information governance policies and guidelines
2.4	Understands educational principles sufficiently to inform the appraisal discussion and the design of professional development objectives	Demonstrates a learner-centred approach to the doctor's professional development Facilitates review of the doctor's practice Promotes quality improvements in patient care through the professional development of the doctor Supports the design of appropriately specific, measurable, achievable, relevant and time-defined (SMART) PDP objectives Supports the role of professional development in quality improvement

2	Knowledge and understanding: to understand the role and purpose of the medical appraiser in order to be able to undertake effective appraisals	
	Competency	Behaviour
2.5	Understands the <i>Good Medical Practice Framework for Appraisal and Revalidation</i> and GMC supporting information requirements, including relevant specialty-specific guidance	Undertakes all appraisals according to the <i>Good Medical Practice Framework for Appraisal and Revalidation</i> and promotes GMC supporting information requirements, including relevant specialty-specific guidance
3	Professional judgement: to analyse and synthesise information presented at appraisal and to judge engagement and progress towards revalidation	
3.1	Evaluates the portfolio of supporting information effectively and consistently	<p>Applies GMC principles and requirements and specialty-specific guidance appropriately</p> <p>Supports the doctor in developing a portfolio covering the full range of supporting information and the full scope of work appropriate to the stage of the revalidation cycle</p> <p>Makes appropriate sign-off statement(s) to the responsible officer, highlighting the reasons for the statement(s) where necessary</p> <p>Reviews evaluation standards with other appraisers and adapts behaviour to improve consistency</p>
3.2	Judges accurately and consistently whether the supporting information shows that the doctor is on track to revalidate	Makes accurate and consistent judgements about the cumulative quantity and quality of supporting information related to different stages of the revalidation cycle
3.3	Able to judge whether there is a patient safety issue or emerging conduct, health or performance concern based on the material presented and the appraisal discussion and take appropriate action	<p>Responds appropriately to patient safety issues and early signs of emerging conduct, health or performance concerns according to local policy and procedures</p> <p>Demonstrates the ability to suspend the appraisal process where necessary and take appropriate further action</p>

		Communicates concerns to the doctor and the responsible officer (or deputy) in a timely fashion
3.4	Able to judge whether the doctor has appropriately engaged in the appraisal process and the review of their full scope of work	<p>Communicates accurate and consistent judgements about the engagement of the doctor in annual medical appraisal across the whole scope of work</p> <p>Communicates concerns about the doctor's engagement to the doctor and responsible officer (or deputy) in a timely fashion</p>
3.5	Able to evaluate achievement of the previous years' personal development plan objectives and to confirm that the new personal development plan reflects the doctor's development priorities	<p>Reviews previous personal development plan objectives with the doctor, promoting reflection on lessons learned and changes made</p> <p>Indicates the outcome of objectives from previous personal development plans clearly</p> <p>Promotes a new personal development plan that addresses the doctor's development priorities arising from the appraisal and gaps in the accumulating revalidation portfolio</p>

4	Communication skills: to facilitate an effective appraisal discussion, produce good quality outputs and deal with any issues or concerns that might arise	
	Competency	Behaviour
4.1	Able to manage the appraisal discussion effectively	<p>Prepares effectively for the appraisal discussion</p> <p>Sets the context clearly and agrees the priorities for the appraisal discussion</p> <p>Demonstrates the ability to facilitate a well-structured and focused appraisal discussion, centred on GMC standards and the doctor's professional development</p> <p>Demonstrates appropriate time-keeping within the appraisal discussion</p>
4.2	Develops, maintains and applies good communication skills including appropriate levels of support and challenge	<p>Builds good rapport</p> <p>Demonstrates good communication skills including active listening, questioning and summarising</p> <p>Reviews achievements, challenges and aspirations</p> <p>Provides effective feedback and constructive challenge</p>
4.3	Able to manage a difficult medical appraisal	<p>Understands the factors that might contribute to a difficult medical appraisal</p> <p>Demonstrates a range of strategies in managing a difficult medical appraisal</p>
4.4	Able to produce high-quality written appraisal records and outputs	Completes appraisal documentation to a high standard

5	Organisational skills: to ensure the smooth running of the medical appraisal system, including timely responses and sufficient computer skills to be an effective medical appraiser	
	Competency	Behaviour
5.1	Manages time and workload effectively	<p>Completes appraisal workload and documentation in a timely manner, ensuring that there are no missed or incomplete appraisals due to appraiser-related factors</p> <p>Responds in a timely way to doctors, managerial and administrative staff and the responsible officer (or deputy)</p>
5.2	Has sufficient computer skills to perform the role of medical appraiser	<p>Demonstrates sufficient computer skills to perform the role of medical appraiser</p> <p>Responds to electronic communication in a timely manner</p> <p>Demonstrates effective use of computerised support systems for appraisal and revalidation as required by local policy</p>

Appendix 4

Medical appraiser competency self-assessment tool

When used in training it may be useful to include the example below:

Please put a 'B' in the box that most reflects your confidence level before training

At the end of training: please use an arrow and an 'A' to show how confident you are after your training.

For example:

2	Knowledge and understanding	1	2	3	4	5
2.1	I understand the purposes of medical appraisal and revalidation and understand the role and responsibilities of the medical appraiser			B	→A	

Medical appraiser competency self-assessment tool						
Appraiser name:		Date:				
		Need training	Insecure	Adequate	Confident	Able to teach
1	Professional responsibility	1	2	3	4	5
1.1	I demonstrate high standards of professional responsibility, personal integrity, effectiveness and self-awareness					
1.2	I develop my professional competence as a medical appraiser					
2	Knowledge and understanding					
2.1	I understand the purposes of medical appraisal and revalidation and understand the role and responsibilities of the medical appraiser					
2.2	I understand quality and safety systems and can relate this to the context of the doctor's work					

		Need training	Insecure	Adequate	Confident	Able to teach
2.3	I understand and comply with relevant legislation and guidance including equality and diversity, bullying and harassment, information governance, data protection and confidentiality					
2.4	I understand educational principles sufficiently to inform the appraisal discussion and the design of professional development objectives					
2.5	I understand the <i>Good Medical Practice Framework for Appraisal and Revalidation</i> , GMC supporting information requirements and relevant specialty-specific guidance					
3	Professional judgement	1	2	3	4	5
3.1	I am able to evaluate the portfolio of supporting information effectively and consistently					
3.2	I am able to judge whether the supporting information shows that the doctor is on track to revalidate					
3.3	I am able to judge whether there is a patient safety issue or emerging conduct, health or performance concern in the materials presented and the appraisal discussion and take appropriate action					
3.4	I am able to judge whether the doctor has appropriately engaged in the appraisal process and the review of their full scope of work					
3.5	I am able to evaluate achievement of the previous personal development plan objectives and judge whether the new personal development plan reflects the doctor's development needs					

		Need training	Insecure	Adequate	Confident	Able to teach
4	Communication skills	1	2	3	4	5
4.1	I am able to manage the appraisal discussion effectively					
4.2	I demonstrate good communication skills including appropriate levels of support and challenge					
4.3	I am able to manage a difficult medical appraisal					
4.4	I am able to produce high-quality written appraisal records and outputs					
5	Organisational skills					
5.1	I manage my time and workload effectively					
5.2	I demonstrate sufficient computer skills to perform the role of medical appraiser					

Appendix 5 Sample medical appraisal feedback questionnaire

This questionnaire should be completed by the doctor and sent to the appraisal lead or appraisal manager when the post-appraisal sign-off has been completed, or completed online, in which case the results will be collated automatically.

Thank you for completing the following questionnaire. It will be used to provide information to the responsible officer about the quality of the appraisal and feedback to help your appraiser. All feedback will be collated so that it is anonymous before being fed back to the appraiser. If you have a serious concern about the conduct of your appraisal, do not use this form and please contact the responsible officer or appraisal lead directly³. Any significant issues should be dealt with as they arise.

Medical appraisal feedback questionnaire						
Name of designated body						
Name of doctor						
Name of medical appraiser						
Date of appraisal discussion	dd/mm/yyyy					
Duration of appraisal discussion	Hours	<1	1-2	2-3	3-4	>4
Was there sufficient protected time for the appraisal discussion?	Y/N					
Was the venue of your choice, private and professional? ⁴	Y/N					
Comments						

³ The designated body should add contact details here.

⁴ Some organisations may choose to omit or alter the wording of this question.

The administration and management of the appraisal system					
Is the appraisal process satisfactory?					Y/N
Did you have access to all necessary forms and materials for your appraisal?					Y/N
Were you able to collect the necessary supporting information from the organisation(s) where you work?					Y/N
Did the administrative support for the appraisal process meet your needs?					Y/N
Any comments about the administration or management of your appraisal system					
The appraiser <i>(Please give your appraiser feedback for their personal development)</i>	Poor	Borderline	Satisfactory	Good	Very good
Please rate your appraiser's skills in...	1	2	3	4	5
Establishing rapport					
Demonstrating thorough preparation for your appraisal					
Listening to you and giving you time to talk					
Giving constructive and helpful feedback					
Supporting you					
Challenging you					
Helping you to review your practice					
Helping you to identify gaps and improve your portfolio of supporting information for revalidation					
Helping you to review your progress against your last personal development plan (PDP)					
Helping you to produce a new PDP that reflects your development needs					

Managing the appraisal process and paperwork					
Would you be happy to have the same appraiser again?	Y/N	Comments			
Any other comments about your appraiser					

The appraisal overall	
<i>Was the appraisal useful overall for...</i>	
Your personal development?	Y/N
Your professional development?	Y/N
Your preparation for revalidation?	Y/N
Promoting quality improvements in your work?	Y/N
Improving patient care? <i>(where applicable)</i>	Y/N
Any other comments about your appraisal overall	

Appendix 6

Methods of assessment of medical appraisers

The use and application of assessment methods is for the responsible officer to determine and should be described in the designated body's appraisal policy. Assessment may be used in a formative way to give the appraiser feedback on performance and understanding of areas for improvement. It may also be used in a summative way to exclude those who are unable to demonstrate a required level of competence.

There is a spectrum of assessment techniques from informal to formal and the application of these will depend on the particular circumstances and the terms of engagement of the appraiser.

1. Self-assessment

This can be undertaken using the appraiser competency self-assessment tool (see appendix 4).

2. Observation during training

Many competencies, especially those relating to professional responsibility, knowledge and understanding and communication skills may be evaluated by direct observation during training by an experienced appraiser training facilitator.

3. Peer review

This may be performed within an appraiser support group or a learning set or in a buddy system. It may be useful for assessing:

- communication skills, including building rapport, listening, feedback, questioning and challenge
- review of supporting information
- professional judgements and behaviour
- information governance and confidentiality issues
- familiarity with a computerised support system being used for appraisal.

4. Knowledge-based assessments

This may involve online modules or written exercises to assess specific items of knowledge (for example, legislative framework for revalidation, conflict of interest, information governance, equality and diversity, computerised support systems).

5. Feedback

Feedback on the appraiser's performance as an appraiser can be obtained from a number of sources, including:

- doctors who have been appraised (using a structured feedback questionnaire – see appendix 5)
- colleagues, such as other appraisers, an appraisal lead and the responsible officer
- administrative staff involved in appraisal.

6. Observation

This may include:

- direct observation of appraisal or video/audio recording of appraisal (with appropriate consent and consideration of whether it may affect the appraisal being undertaken)
- direct observation of appraisal using other appraisers or doctors or video in an assessment exercise using real material without role play
- direct observation of simulations using appraisers, actors or video in an assessment exercise (with real or fictitious scenarios)
- observation of use of a computerised support system.

7. Objective assessment against pre-agreed criteria

This can include:

- quality assurance of the appraiser's appraisal outputs (for example, personal development plans, appraisal summaries and sign-offs) against quality standards, within a peer group or by the appraisal lead or responsible officer
- quality assurance of the appraiser's review of supporting information (sampling of portfolios to check supporting information meets GMC requirements) within a peer group or by the appraisal lead or responsible officer

- collection and review of information relating to performance as an appraiser:
 - appraisal activity and scope
 - review of incomplete appraisals
 - record of continuing professional development
 - attendance at appraiser support group meetings
 - appropriate handling of patient safety issues
 - response to significant events
 - response to complaints
 - meeting deadlines, completing administrative tasks, response to emails, ease of contact.