

Agenda

The importance of the quality assurance of the appraisal process is obvious from the sheer scale of the appraisal project. All doctors working for the NHS must have an appraisal – possibly the single biggest investment in personnel management the NHS has ever made. For this investment to produce an appropriate return the process must be seen to be uniformly effective and demonstrably comparable across craft groups. In order to define the quality assurance we must remind ourselves of the definition and aims of appraisal in England (DH, 2002)

Best Practice

Appraisal for GPs is a professional process of constructive dialogue, in which the doctor being appraised has a formal structured opportunity to reflect on his or her work and to consider how his or her effectiveness might be improved.

It is a positive process to give GPs feedback on their past performance, to chart their continuing progress and to identify development needs. It is also a forward-looking process, essential for identifying the developmental and educational needs of individuals. The primary aim of appraisal is to help GPs consolidate and improve on good performance, aiming towards excellence. In doing so, it will identify areas where further development may be necessary or useful: the purpose is to improve performance right across the spectrum, from the best to the worst. It can help to identify reductions in performance at an early stage; and also to recognise factors which may lead to a reduced level of performance, such as ill health. Appraisal will underpin CPD and help to develop a reflective culture within service and training. It also provides GPs with an opportunity to demonstrate the evidence for revalidation.

DOH, 2002

The aims of appraisal are to:

- set out personal and professional development needs and agree plans for these to be met
- review regularly a doctor's work and performance, utilising relevant and appropriate comparative operational data from local, regional and national sources
- consider the GP's contribution to the quality and improvement of services and priorities delivered locally
- optimise the use of skills and resources in seeking to achieve the delivery of general and personal medical services
- identify the need for adequate resources to enable any service objectives in the agreed job plan review to be met
- provide an opportunity for GPs to discuss and seek support for their participation in activities for the wider NHS
- utilise the annual appraisal process and associated documentation to meet the requirements for GMC revalidation against the seven headings of Good Medical Practice

Sheet 1
October 2004

ABC of GP Appraisal
Definitions and Aims of Appraisal
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Formal responsibility for appraisal rests with the Primary Care Organisation (PCO). The responsibilities of the PCO should be as follows:

- To ensure that an appraisal scheme is in place that covers all doctors working in general practice within the span of the organisation and that commands the confidence of the profession and their representatives locally (i.e. the LMC and usual professional channels)
- To ensure that all relevant doctors undergo annual appraisal in line with the scheme
- To establish workable arrangements for identifying, appointing and training appraisers
- To ensure that appropriate mechanisms are in place to quality assure appraiser and appraisee training; to regularly review the appraisal process in the light of participant experiences and changing circumstances; and to take the necessary action to redress any concerns with the process
- To ensure that robust processes are in place to deal with worries or complaints from individual GPs about the process or outcomes of appraisal
- To ensure that action is taken as far as possible to address the education and development needs of GPs and service development requirements identified and agreed in the course of appraisal
- To make adequate financial provision to support the appraisal process.

Checklist

The Chief Executive of the PCO is the officer ultimately accountable for the discharge of the above responsibilities. Since the publication of the original documentation, payments for protected time have been included in the global sum payment for nGMS practices and are therefore no longer the responsibility of the PCO.

These aims and the responsibilities set for the PCO should be the criteria upon which the entire appraisal system is evaluated for quality assurance purposes. The practical aspects of this are further developed in the companion paper "Quality Assurance of Appraisal for General Practitioners 2 – Quality Assurance in Practice".

References

DOH (2002); Appraisal for General Practitioners working in the NHS DOH, London