

# The FourteenFish Guide to Appraisal

**FourteenFish** 

in association with

**MyLocumManager**



My Locum Manager have teamed up with FourteenFish – a modern and easy to use Appraisal and Revalidation toolkit for Doctors and Nurses.



MyLocumManager helps locum GPs save time, stress and money with their user friendly toolkit.

The toolkit lets you manage your diary, invoicing, pension forms and tax from any device, anywhere, anytime!

This is a little guide to help you understand appraisal and get started.

Look out for Locum tips throughout the guide.



Practicing GPs in the UK have to complete a formal appraisal every year and revalidate once every 5 years.

An appraisal reflects on an individual's practice and performance in order to demonstrate that they remain up to date and fit to practice.

It also helps doctors plan their professional development and identify their learning needs.

Revalidation is to demonstrate to the GMC that you are up to date and fit to practice. GPs must revalidate every 5 years.

To successfully revalidate you must have 5 satisfactory appraisals (one for each year, unless there are special circumstances such as a career break), results from a completed patient survey and a completed colleague survey. The surveys must have been completed within the 5 year revalidation period.



The appraisal preparation consists of 6 sections:

## 1) CPD - Continued Professional Development

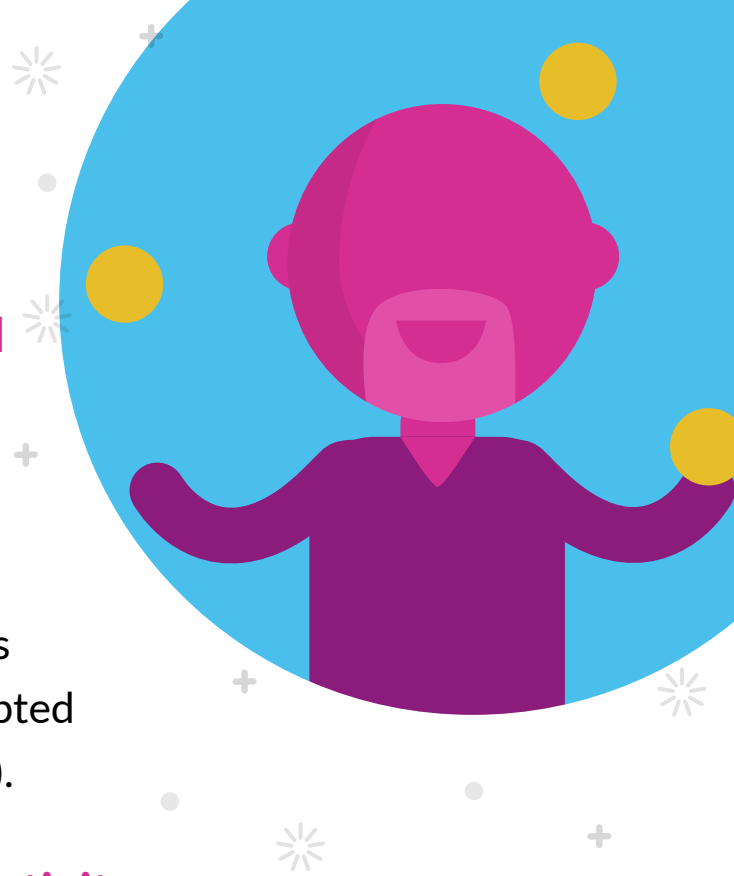
Learning and Reflection should be concise points that neatly describe your learning, along with any changes made or planned. The generally accepted target is 50 credits (1 credit = 1 hour).

## 2) QIA - Quality Improvement Activity

You should demonstrate that you regularly participate in activities that review and evaluate the quality of your work. You should complete this in relation to your complete scope of work, including any clinical, academic, managerial and educational roles that you undertake. Try and have at least one QIA in every appraisal. We have examples on our QIA page.

What appraisers are looking for here is your reflection and then any action that has been taken which will improve the quality and safety of care in your practice.

All practices discuss significant events and these are a perfect source of quality improvement activities. In the context of appraisal, a significant event is an unintended or unexpected event which could or did lead to harm of a patient.



### 3) Significant Events

This section is specifically for recording your personal involvement in significant events. The GMC defines these as 'events which did or could have led to patient harm'. They include Serious Untoward Incidents (SUIs) and Serious Incidents Requiring Investigation (SIRIs) or their equivalent.

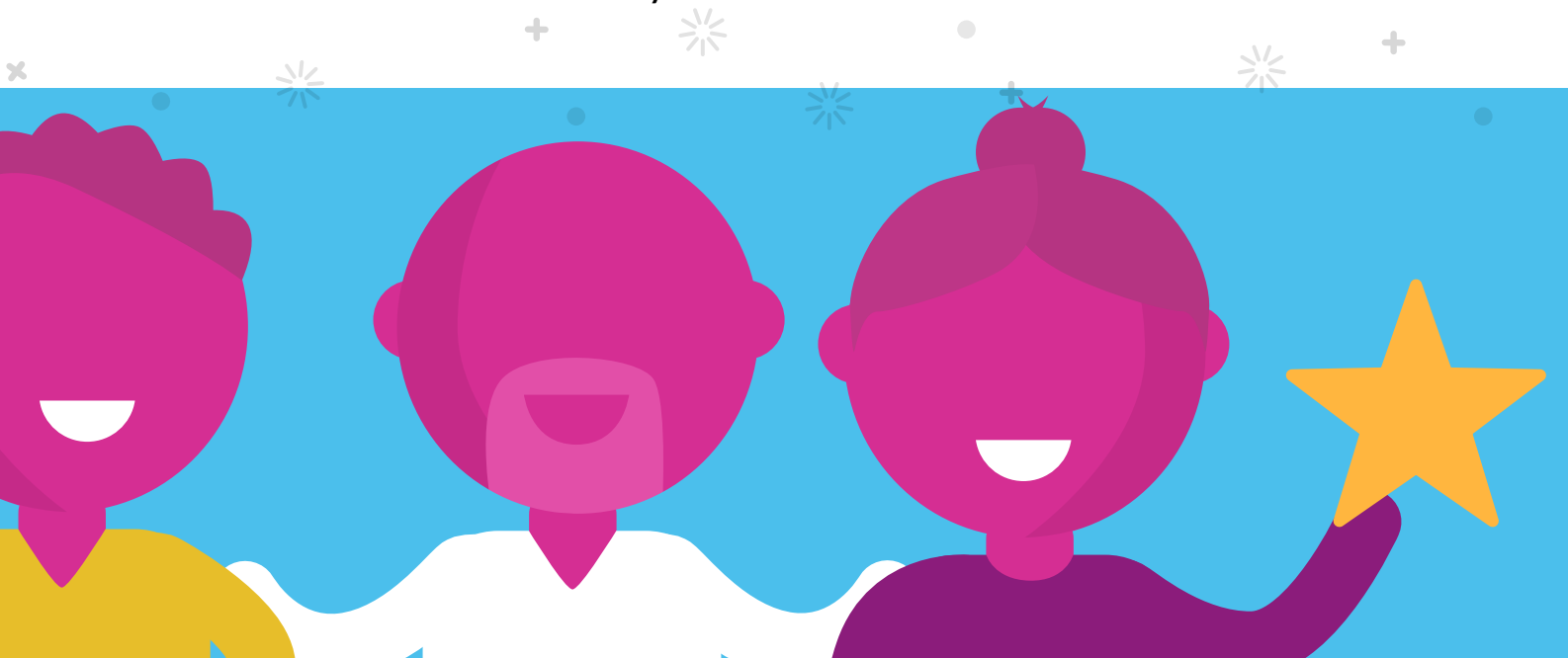
If you attend a Significant Event meeting and record learning from this but it doesn't meet the GMC definition or you weren't directly involved then you can still include this in your appraisal but as CPD/QIA.



As a locum you should try to ensure that the places you work let you know if you have been involved in a significant event so that you can share the learning by getting the minutes, even if you can't always attend the meeting.

### 4) Feedback - Patient and colleague feedback

In addition each revalidation cycle should include at least one GMC complaint patient survey, the RCGP now recommends that you reflect on some of the many other



sources of feedback from your patients, including compliments, thank you cards, oral feedback, etc, annually at your appraisal.

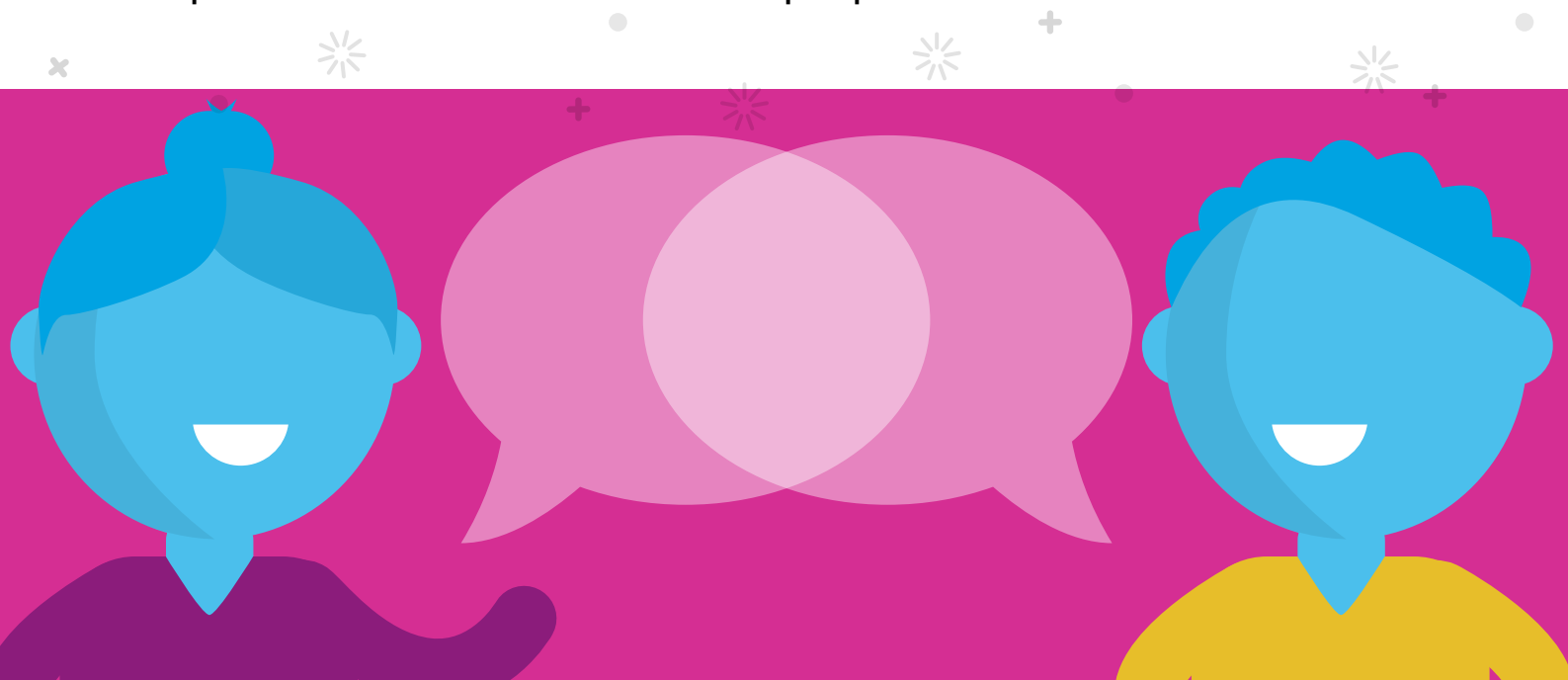
You should also complete a GMC complaint colleague feedback survey at least once in your revalidation cycle. Both patient and colleague feedback should be recorded and reflected upon in your appraisal.

## Colleague feedback

If you are not working in the same place regularly it can be challenging finding colleagues for feedback.

For your revalidation colleague feedback questionnaire (also known as a MSF or 360 survey), remember you can ask colleagues that you have worked within different organisations, and these should be a spread of clinical and non-clinical people. GP locums interact frequently with practice receptionists, and you can certainly include them as part of your colleague feedback.

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## Patient feedback

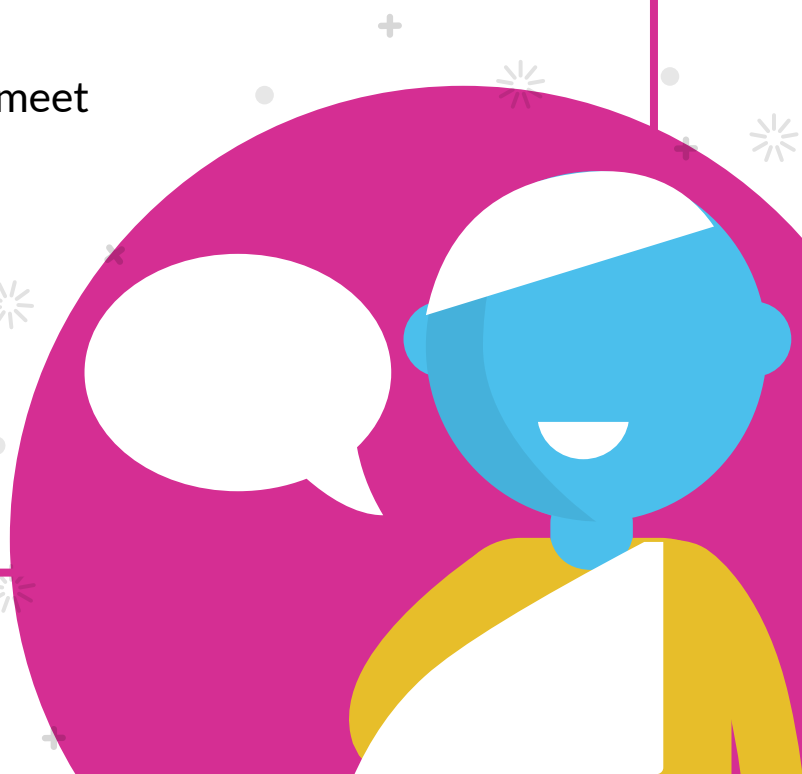
Completing your patient survey can also have its challenges.

For those in a practice out of courtesy we would recommend letting the practice manager know and you might have to do the exercise over several sessions and practices. These can still be collected and posted independently if you ask reception.



Some locums might only do home visits or telephone triage and in these cases some doctors supply self addressed envelopes to patients with questionnaires. If they are feeding back after the event then a covering letter explaining the process and when you saw them might improve return rates.

Some locums may not be able to meet the usual minimum number of responses for colleague and patient feedback. This should always be documented and discussed with your appraiser as to the reasons. It's definitely





worth checking with your appraiser and designated body before finishing the feedback exercise with less than the minimum responses to avoid having to repeat the exercise.

It is recognised locums generally score lower in both colleague and patient feedback. Therefore it is especially useful for locums if you can get peer comparison so your results are compared to other locums. Don't get too disheartened if your scores are lower than the benchmarks, but instead use them as a tool to reflect on with your appraiser.

## 5) PDP - Personal Development Plan

This is formed of 3 to 5 SMART (Specific, Measurable, Achievable, Relevant, Timed) targets you should set yourself. These can be work related or personal.

Your targets are then discussed and reviewed with your appraiser. Some targets may be marked as complete and others can be carried over to next year. New targets should be added each year.

## 6) Complaints & Compliments

You will need to make a statement either confirming you have received a formal complaint in any of your roles or you have not received a complaint at all.



If you have received a complaint you will need to record some formal reflection into your appraisal.

If you receive a formal compliment you will need to record it and discuss the significance of it during your appraisal meeting. You are reminded that patients, colleagues and other third parties should not be identifiable.

## What is reflection?

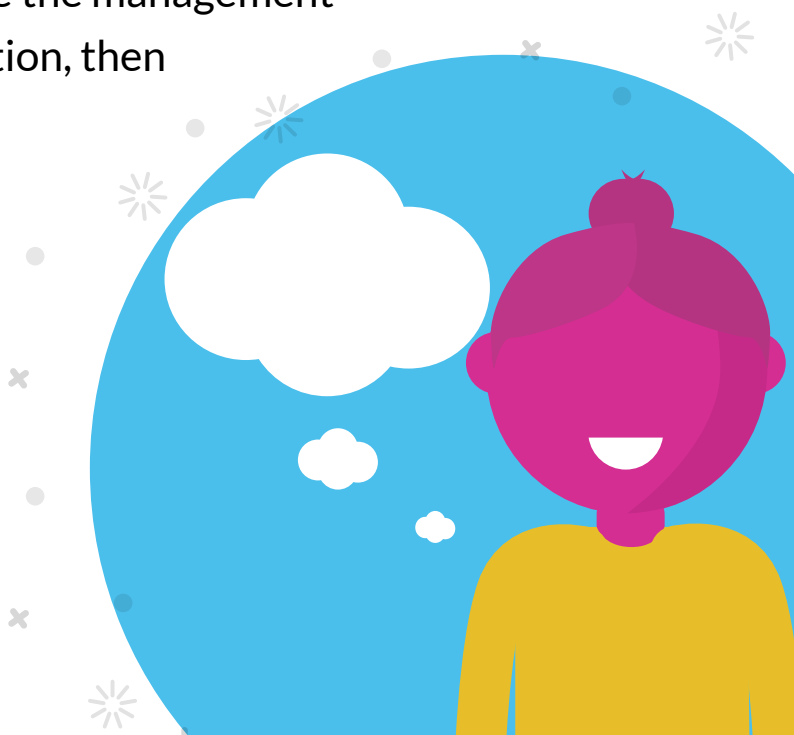
Reflection is a process to identify what you need to change in order to be a better doctor. It is not a case of recording how you feel or listing the content of a meeting but more about what you would have done differently.

Reflection should be done after CPD sessions and you might find it helpful to ask yourself 'How does this relate to my patients?' and 'Do I need to change anything?'

If reflection leads to some kind of action – for example an audit, new practice policy or even demonstrated in the real impact for patients by reporting cases where the management was different as a result of reflection, then this turns CPD into a QIA.

## Career break

If you are planning a career break or you are going to work



abroad for a decent period of time (a year or more) then it is always worth contacting Health Education England, they can help find solutions to fit your circumstances and are used to such questions.

## Tips for recording CPD

Recording 50 hours of CPD a year can sound overwhelming however you are probably doing way more than 50 hours of learning a year, it's the recording of this learning that people struggle with.

Our first tip would be to record as much CPD as you go. Even if you are between patients making a note of something you have learnt or want to research further will all add up and help.

Book yourself onto a course (or two). Even if you only do one course in your appraisal year that is easily 6 hours of learning and plenty of recording and reflecting opportunity!

Keeping yourself updated with current guidance, regulations and research is something you are sure to do throughout your career, make sure when you have read that chapter or watched a few videos, you record how many hours you spent doing it and don't forget to reflect upon it.



# How FourteenFish can help with your appraisal

## The Learning Diary

This is a fantastic way to record your CPD, QIA, feedback, etc. Simply fill it in throughout the year and tick the entries you want to appear in your appraisal document and we will populate the appraisal forms in the relevant places with your Learning Diary entries.

The Learning Diary is available online and as a free app for iPhone, iPad and Android. The app can be used even if you are not connected to the internet, it will automatically sync when you reconnect to wifi so you can literally record learning anywhere!

Or simply forward emails to **[learning@fourteenfish.com](mailto:learning@fourteenfish.com)** as a quick way to capture learning and reflect on later.

The FourteenFish Library is a modern way for GPs to stay up to date. Over 24 hours of clinical update videos and new content added every month, CPD just got easier!



To find out more go to:  
**[www.fourteenfish.com](http://www.fourteenfish.com)**

Registering is free and easy!

Check out the whole toolkit as well as our full list of products and find out for yourself how easy FourteenFish are making appraisal and revalidation.

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