

*“....The most important outcome for appraisal is the response of the organisation...”*

*(Chambers et al, 2004)*

## Agenda

At the end of an appraisal interview the GP being appraised should have gained insights into their professional practice and formulated a development plan that will direct their professional development in the coming year.

In addition most GPs will have gained affirmation of what they do each day and ideas about how to develop their practice further. The form to be returned to the PCT (Form 4 and the PDP) summarises these things and contains information which can be used by the individual, their practice and the PCO to inform development and change. What outcomes can be expected from the appraisal process?

## Best Practice

### Outcomes in Education and Training

- **For the individual:** A plan for development over the next year with objectives, a realistic timeframe and, if appropriate, outcomes that will demonstrate whether the outcomes have been achieved
- **For the practice where the GP works:** Information about how the GP can contribute to practice development. Some education and training needs can and should be part of the practice's in house training programme. Where courses are needed for a particular area of training the GP should be given the time and resources to attend.
- **For the PCO:** The education and training programme for the organisation should be informed by information from the appraisal of all staff. A database can be useful for recording courses attended and expressed wants and needs. Commercial IT products are available which can capture this information. Recording this data shows how PCO funding might most usefully be used and can also be used to build up a skills directory for sharing best practice.
- **Tutors and educational facilitators:** those working in PCOs will already be active in directing education and training policy. Beyond that there are possibilities for setting up peer support groups; a common finding in GP appraisals is a need for peer support.

### For Informing the PCO of Problems

Many of the constraints to good clinical care lie outside the GP practice. A method of telling the PCO about this is essential, using a feedback form can inform the process of commissioning secondary care and improving how information is sent out to practices, for example how the QOF assessments will be done.

### To Improve the Appraisal Process

The PCO needs to know how GPs find the process, this will be described more fully in evaluation. The key items in this are:

How the appraisals are booked and paperwork handled.

How useful GPs found their appraisal; what could the appraiser have done better?

Did the appraisers have a good range of tools to help the GP demonstrate Good Medical Practice?

Sheet 11  
October 2004

“Using the results of GP Appraisal, An Overview”  
Dr Honor Merriman

# ABC of GP Appraisal

NAPCE  
1<sup>st</sup> Floor, Carne House  
Parsons Lane  
Bury  
Lancashire  
BL9 0JT

Tel: 0161 272 0110  
Fax: 0161 763 9278  
Email:  
[napce@btopenworld.com](mailto:napce@btopenworld.com)  
Website:  
[www.napce.net](http://www.napce.net)

## Checklist and References

Chambers et al (2004) *The Good Appraisal Toolkit*. Radcliffe Medical Press, Oxford  
GMC (2001) *Good Medical Practice*. GMC, London