

*“The prime aim of appraisal is to improve patient care”*

Maurice Conlon, 2003

Sheet 12  
October 2004

## Agenda

Patients, General Practitioners and Primary Care Organisations (PCOs) all want high quality health care to be delivered when and where it is needed. GP appraisal aims to encourage, support (and challenge) GPs to do this in a confidential, quality assured process by looking at their personal development and learning needs on an annual basis. The responsibility for delivery of this appraisal process, and its compliance with national guidelines, lies with the PCO.

Whilst the individual GP is the focus of an appraisal, the process is designed to consider “how patient care and working within NHS organisations and systems can be improved” (DOH, 2002), individuals often having insight into changes that are needed.

The responsibility for ensuring that learning and development needs identified in appraisal are addressed lies with the individual doctor. The PCO does have a responsibility to “ensure that action is taken as far as possible to address the educational needs of GPs and service development requirements identified and agreed in the course of appraisal” (DOH,2002)

The annual appraisal results in confidential forms that inform the GPs development over the next 12months and form a basis for discussion at the next appraisal. Robust processes exist to ensure the confidentiality of these documents, but they should be summarised and included, in an anonymised format, in an annual appraisal report for the Professional Executive Committee (PEC) of the PCO. This report is the only process through which the PCT can discharge its obligations to respond to appraisal and the only way in which the organisation can respond to the needs highlighted in appraisal. If patient care is to improve it is a vital document.

## Best Practice:

There should be a clearly identified individual, normally the GP appraisal lead, who has responsibility to summarise and anonymise the appraisal forms and produce an annual report.

The report should consider the following areas:

### 1. Individuals with responsibility for appraisal

The report should identify those with responsibility for the appraisal process and outline their individual responsibilities. This should include a list of all trained appraisers who carried out appraisals in that year and an indication of any likely need to train more appraisers in the coming 12 months

### 2. Activity levels:

The report should detail

- The number of GPs appraised (including completion of paperwork and production of a development plan)
- The reasons why some GPs may not have been appraised

### 3. Quality assurance of the appraisal process

The report should outline the mechanisms in place to ensure the appraisal process has robust mechanisms for quality assurance and progress made against any issues highlighted in the previous appraisal report.

“How to write an Annual Appraisal Report”  
ABC of GP Appraisal  
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## Quality assurance of the appraisal process contd.

Areas that should be considered in the section would include:

- Infrastructure of the appraisal process
- Appraiser selection training and support and arrangements for performance review of appraisers
- The appraisal process

The report might include a checklist that demonstrates progress against good practice in quality assurance.

### 4. Evaluations of Appraisal

The report should include a summary of the evaluations produced by each GP after their appraisal, and identify progress made against any issues identified. These results may be best presented in a graphical format.

### 5. Individual Learning Needs

The report should include a summary of learning needs identified in appraisal. Particular attention should be made to:

- Needs shared by significant numbers of GPs
- Needs that suggest a significant detriment to patient care if not addressed
- Needs that recur in successive years.

The report should carefully consider progress made by individuals in addressing needs identified in previous appraisals and barriers that may exist for individuals in addressing those needs. It may be that the report could make recommendations as to how these needs might be addressed.

***Areas that require input from the PCO should be clearly highlighted to ensure needs are met. This might include options for involvement of other organisations.***

### 6. Individual Development Needs

The report should include a summary of individuals' developmental needs. This would include occupational health issues including stress and the way in which the PCO is seen to be supporting individuals.

***Areas that require input from the PCO should be clearly highlighted to ensure needs are met. This might include options for involvement of other organisations.***

### 7. Organisational Developmental Needs

The report should include issues GP have identified that may adversely affect themselves or patients. These might be areas for which the PCO has responsibility or areas that should be highlighted to other Trusts or organisations.

***Areas that require input from the PCO should be clearly highlighted to inform workforce development***

### 8. Costs

The costs incurred in training, payments to appraisers and to appraisees should be identified with, if possible, the costs of administration and support.

### 9. Progress made by the PCO in response to the previous year's annual appraisal report

The process of change is enhanced if it is understood by all those involved in the changes. The PCO should produce a summary of the progress made against issues identified in the previous year's appraisal report. This should be far more than an administrative chore, rather an opportunity for the appraisers and those appraised to see how the issues are identified are leading to change. Without this last step the appraisal process may deteriorate into a cynical, and expensive exercise that forgets that patients' care is at the core of GP appraisal.

## Checklist

The appraisal annual report should:

- Be the responsibility of a named individual
- Succinctly address the 9 areas highlighted above
- Protect the confidentiality of the appraisal process
- Allow the PCO to identify needs arising from appraisal
- Allow the PCO to demonstrate a quality assured appraisal process is being delivered
- Allow the PCO to identify progress in responding to issues identified in previous annual appraisal reports

## References

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