Welcome to the Annual Conference
Dr. Stephanie Hughes FRCGP
Deputy Service Lead, Wessex Appraisal Service
Theme: “Stretching the Best”
Housekeeping

- TIMINGS
- FIRE EXITS
- PHONES
- TWEETING
- PHOTOGRAPHY/FILMING
- FEEDBACK
- CONFIDENTIALITY
- PARTICIPATION
- REFLECTION
- FUN
What do doctors say about appraisal in general?

2015 RCGP Revalidation Survey

• What proportion of respondents felt that appraisal had fulfilled its purpose in supporting quality improvements in practice?
What do doctors say about appraisal in general?

2015 RCGP Revalidation Survey

- 33.43%
- Not bad!
What do doctors say about Wessex appraisal in particular?

Wessex Appraisal Service Survey 2015-16

- What proportion of respondents felt that their Wessex appraisal improved patient care and promoted quality improvements in their work?
What do doctors say about Wessex appraisal in particular?

Wessex Appraisal Service Survey 2015-16

86% useful for improving patient care, 90% useful for promoting quality improvements in their work (1,232 respondents, 55%)
What do doctors say about appraisal in general?

2015-16 NHS England South (Wessex) survey

90%

So what’s the difference?
The very best are already in the room!

WHEN YOU’VE DONE
SOMETHING AWESOME
GIVE YOURSELF
A PAT ON
YOUR BACK
The Wessex trend over 3 years

This is not a flash in the pan......

• 2013-14 89% useful for improving patient care, 92% useful for promoting quality improvements
• 2014-15 87% useful for improving patient care, 91% useful for promoting quality improvements in their work (1,265 respondents, 58%)
Together we can get even better!

BE THE BEST

YOU CAN BE!
Enjoy the conference!
Keeping appraisal “reasonable and proportionate”

Dr Susi Caesar
RCGP Medical Director for Revalidation

Developing people for health and healthcare
www.hee.nhs.uk
Appraisal and Medical Professionalism:

“People don’t care how much you know until they know how much you care”

David Maister (1997) True Professionalism
Feedback message:
Doctors are Professionals:

“I feel I have always driven myself for personal and professional development both before the appraisal process began and subsequently. I don't feel appraisal has changed this”
Appraisal improves patient care:

• “By directing my self-education and self – development”
• “…encourag[ing] me to maintain high quality improvement standards”
• “…interesting ideas re techniques to learn for consulting with challenging patient groups”
• “Reaffirming the need to look after myself as a priority in order to look after my patients”
• “increasing confidence in my work”
So why is there disillusionment:

- The “burden” of regulation across more than just appraisal
- The difficulties of bringing a subconscious habit (reflection) to consciousness and capturing it
- The difference between reflecting and demonstrating/documenting reflection
- The fact that we see ourselves as medical professionals who “would have done this anyway!”
reducing the burden

Royal College of General Practitioners: RCGP
Guide to supporting information for appraisal and revalidation (2016)

Dr Susi Caesar
Medical Director for Revalidation
Royal College of General Practitioners
March 2016

With many thanks for the input and valuable contributions from patient and lay representatives and a wide range of internal and external stakeholders.
You are here for your own Professional Development:

• You are not paid to be here
• You are not expected to be here
• You have chosen to use this opportunity that has been offered to you to **self-direct** your own **professional development** as an appraiser or appraisal lead

We hope that this conference will meet your needs and provide plenty of new ideas for you to reflect on
Mirror, mirror on the wall
Who's the most reflective of them all?