Induction and Refresher Scheme and GP Appraisal
Review Feb 2014: Drs Richard Weaver, Susi Caesar and Ms. Gill Watson

All GP’s registered on the NHS National Performers List (England) (NPL) are required to undertake an annual appraisal within the appraisal year which runs from the 1st April to 31st March.

GP Trainees who complete a 3 year GP training programme have an appraisal with their trainer in the last specialist trainee year and are not due to have their first independent NHS appraisal until the appraisal year following the one in which they qualify.

GPs who successfully apply to the I&R Scheme and have completed the COGPED Learning Needs Assessments (MCQ and Simulated Surgery) apply to go onto the NPL with conditions of “working only under supervision in a GP training practice”. During the time on the scheme, doctors returning to medical practice by this route will be expected to gather appropriate supporting information to form a portfolio for appraisal and revalidation.

The appraisal team will be notified of successful application and entry into the I&R scheme. Details and timings of the applicants I&R placement and outcome at the end of the scheme will also be passed to the appraisal team.

Successful finishers may apply to be on the NPL without conditions and therefore work as a GP without the requirement of supervision. At this point, they become new entrants onto the NPL and eligible for an annual appraisal commissioned by the Area Team (AT) they have joined, in exactly the same way as a GP moving from another area and transferring between Area Teams.

I&R GPs should plan to have their first appraisal within 3 months after successfully completing the scheme and full inclusion on to the NPL. Most I&R schemes are for short periods of 2-3 months but on occasion may be for 6 months.

If the scheme is longer than 6 months the GP must arrange to complete an NHS Appraisal within 12 months of the start of a placement on the I&R scheme, even if they have not completed the scheme.

Under certain circumstances it is possible to delay the appraisal for up to 6 months of completion of the scheme I&R with the agreement of the appraisal team, the Head of School and the Responsible Officer. Most doctors find that an early appraisal is a useful opportunity to focus on the year ahead and produce a new Personal Development Plan (PDP).

The month in which this first appraisal falls will then become the future annual appraisal year month.

In brief, the supporting information for appraisal and revalidation should include:

- Any summary of discussion or PDP produced as a result of the I&R scheme training, with reflection on progress with the PDP objectives
- A Continuing Professional Development (CPD) log of at least 50 hours (or “credits”) of CPD (which can include CPD during the I&R scheme) – needed annually with reflection on lessons learned and changes made
- An audit/ data collection - as evidence of ability to investigate and reflect on what you actually do, make changes according to best practice, and review what you do after the changes have been made – some form of quality improvement activity is needed annually
- A case review/ case based discussion – needed annually to demonstrate that you are a reflective practitioner - some form of quality improvement activity is needed annually and this is particularly useful where there is no appropriate significant event to include
- Any significant events involving you personally, with evidence that they have been discussed with peers – needed whenever one occurs (or a statement that there has not been a Significant Event)
- Any multisource feedback or patient satisfaction survey you might have done – essential once in a revalidation cycle but especially useful for participants on the I&R scheme
• Any complaints – needed whenever one occurs (or a statement that there has not been a complaint)
• A statement about health – needed annually
• A statement about probity – needed annually

For more detail look at:

• Suggested supporting information from the RCGP and the RST on the website
  • http://www.wessexdeanery.nhs.uk/gp__primary_care/appraisal_service.aspx

Using this list as an aide memoire will ensure that you don’t go far wrong but reviewing the appropriate websites to check the latest RCGP and GMC guidelines is strongly recommended.

The Wessex LMC website contains a very useful on-line CPD log and easy to use colleague and patient feedback questionnaires that are GMC compliant:

https://www.mylmc.co.uk/

The information gathered during the I&R scheme should be submitted as part of the evidence for the annual appraisal, as should any other supporting information that has been collected during the 12 months prior to the appraisal discussion.

It is essential to engage in the annual appraisal process and use defined process laid out in the NHS Revalidation Support Team Medical Appraisal Guide (RST, London, March 2013) (MAG) and mirrored in the Medical Appraisal Guide Model Appraisal Form (MAGMAF)

Your educational supervisor on the I&R scheme will be a good resource to help point you in the right direction, but feel free to contact the appraisal team if you have any specific queries, at:

gpappraisal@wessex.hee.nhs.uk