Appraisal Policy

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Policy Statement

The aim of this policy is to ensure that all licensed medical practitioners with a prescribed connection to the Faculty of Occupational Medicine (FOM) undergo a high quality and consistent form of annual medical appraisal. It is a requirement for Designated Bodies, under NHS England’s Annual Organisational Audit\(^1\), to have such a policy in place. Revalidation of licensed doctors is required every five years\(^2\) and is based on comprehensive annual strengthened medical appraisals undertaken over that five year cycle. It is designed to improve patient safety and quality of care by ensuring that licensed doctors remain up to date and continue to be fit to practise.

The policy has been approved by the FOM Designated Body Sub-committee and the SOM Council.

Scope of the Policy

This policy applies to those doctors who are members of the FOM and who have a prescribed connection with the FOM as their Designated Body in accordance with the relevant legislation\(^3\). It also applies to those doctors whose employer has contracted with the FOM to provide the responsible officer function. Specific responsibilities are described at Appendix A.

Its purpose is to outline the requirements and arrangements for conducting the appraisal of those doctors, following direction by the General Medical Council, NHS England and other relevant bodies. This policy is not exhaustive and is not intended to cover all aspects of appraisal and revalidation.

Appraisal is not a new concept, however, the approach and use of information obtained during appraisal is clarified and strengthened for revalidation. The policy defines the responsibilities of key personnel involved in appraisal and is supplemented by the FOM and SOM’s Appraisal and Revalidation Quality Manual.

Equality Statement

The policy has been the subject of an equality impact assessment and will be monitored through the FOM Designated Body Sub-committee, reporting to the FOM Board of Trustees.

However, doctors with special needs or disabilities should contact the Head of Professional Standards to discuss any specific requests to modify the conduct of the appraisal or make other reasonable adjustments. Requests must be formally submitted and will require the appraisee to provide appropriate evidence.

\(^1\) NHS England Annual Organisational Audit (AOA)
\(^2\) The first revalidation cycle will necessarily entail a shorter period for most doctors.
\(^3\) The Medical Profession (Responsible Officers) Regulations 2010 and The Medical Profession (Responsible Officers) (Amendment) Regulations 2013
Objectives of Appraisal

The objectives of medical appraisal are to:

- Provide individuals with an opportunity to:
  - Reflect on their practice and their approach to medicine
  - Reflect on the supporting information they have gathered and what that information demonstrates about their practice
  - Identify areas of practice where they could make improvements or undertake further development
  - Demonstrate that they are up to date

- Provide assurance to employers and the public that doctors are remaining up to date and fit to practise across their whole scope of practice.

- Provide one of the requirements towards a route to revalidation

Appraisal is a supportive mechanism focusing on enhancing quality improvement. It is designed to recognise good performance, provide feedback, and assist in the identification of performance issues so they can be dealt with at an early stage. Every doctor is responsible for ensuring that they are appraised annually on their whole practice, so will need to collate information from all aspects of their work as a doctor.

Appraisal in the context of revalidation

Medical appraisal is the appraisal of a doctor by a trained appraiser, informed by supporting information defined by the GMC, in which the doctor demonstrates that they are practising in accordance with the GMC Good Medical Practice Framework for appraisal and revalidation.

Effective medical appraisal and subsequent revalidation will satisfy the requirements of Good Medical Practice and support the doctor’s professional development. This process is supervised by the responsible officer. Where indicated, the responsible officer will inform the GMC of any concerns about a doctor’s fitness to practise, or a doctor’s refusal to engage in the processes that inform the revalidation process. These issues must be addressed as they arise and not left until the revalidation recommendation is due.

In the event that the doctor engages with appraisal and revalidation but is unable to satisfy the requirements of revalidation at the prescribed time, the responsible officer may recommend to the GMC that they defer the revalidation date for up to 12 months. In the event that the doctor is due a further annual strengthened medical appraisal during this deferral period, this should be scheduled as normal and the accompanying portfolio of information submitted as part of the revalidation portfolio.

In the event however that although the doctor engages with appraisal and revalidation, significant concerns or patient safety issues are highlighted, The FOM Investigation Policy will be invoked.
In the event that the doctor fails to participate in an annual strengthened medical appraisal and does not respond to three reminders sent at monthly intervals to the last known email and postal addresses of the appraisee, the situation will be elevated to the GMC, either through discussion with the Employer Liaison Adviser, or through the issue of a GMC non-engagement concern notification (REV6).


**Conflict of Interest**

Appraisers must remain objective and therefore must declare any conflict of interest with the appraisee. Reasons for declaring a conflict of interest may include, but are not limited to:

- all doctors who are employed by the FOM
- all doctors who are members of FOM Committees including the FOM Board of Trustees
- all doctors who are involved in the appraisee’s line management within the FOM or other employer
- all appraisers with whom the appraisee has a shared personal, clinical, financial or commercial interest etc.
- a significant breakdown in the relationship between the appraiser and appraisee

Appraisees who feel their appraiser may have a conflict of interest should apply to the SOM or the FOM RO for an alternate to be appointed, stating their reasons.

It is usual for the same appraiser to be allocated for a maximum of three appraisals in any revalidation cycle. Measures are taken by the SOM at the allocation stage to avoid appraisers appraising each other within the last 5 years. Should this be unavoidable, both appraiser and doctor are expected to record the action taken by each to mitigate any conflict of interest issues (including recording of no perceived conflict of interest issues) within the appraisal documentation.

Should an appraisee wish to seek an alternate appraiser due to conflict of interest they should contact the Appraisal Administrator appraisals@som.org.uk outlining the reason they wish to make a change. All efforts to allocate a new appraiser, within the limitations of the normal selection process, will be made.

Further information on conflicts of interest is available at http://www.england.nhs.uk/revalidation/wp-content/uploads/sites/10/2015/05/map-annex-b.pdf
**Complaints Process**

If an appraisee is unhappy about any aspect of their appraisal, they can raise this with their appraiser, the SOM appraisal team, or the FOM revalidation team.

If this does not resolve their concerns and they wish to make a formal complaint, the SOM have adopted the NHS England complaints policy available at [http://www.england.nhs.uk/revalidation/wp-content/uploads/sites/10/2015/05/map-annex-f.pdf](http://www.england.nhs.uk/revalidation/wp-content/uploads/sites/10/2015/05/map-annex-f.pdf). A complaints form may be obtained from appraisal@som.org.uk.

If the complaint relates to revalidation or the role of the Responsible Officer, the complaint should be directed to the FOM. The FOM complaints procedure may be accessed at [http://www.fom.ac.uk/about-us/complaints-procedure](http://www.fom.ac.uk/about-us/complaints-procedure).

**Quality Assurance**

Our quality assurance activities allow for internal and external monitoring. We review appraisal information and seek feedback from appraisees on their experience of the appraisal process and their appraisers, as part of our continuous improvement activity. Other methods include:

- Through questions contained in the PReP revalidation management system
- Through an SOM Survey Monkey questionnaire sent to all appraisees on notification the appraisal meeting has taken place.
- Review of complaints received
- Review of appraisal output information and audit using national templates.
  - In accordance with the requirements of the NHS England Framework of Quality Assurance for Responsible Officers and Revalidation, the SOM Clinical Appraisal Lead will audit at least 10% of the appraisals each year.
  - The RO will also provide an Annual Report to the FOM Board of trustees to enable it to complete the required annual Statement of Compliance.
- An annual audit will also be conducted to identify missed or incomplete appraisals and reported to the Designated Body Sub-committee and then to the FOM Board.
- At least once in each revalidation cycle (commencing December 2012), the following independent reviews will also take place
  - Quality assurance by external partners CHKS Ltd (for the SOM appraisal scheme) and MIAD (for the FOM revalidation process)
  - External quality assurance by NHS England
Review

This policy is reviewed at least annually by the Designated Body Sub-committee which recommends it to the FOM Board for approval. Further amendments will be made as necessary, for example, in response to any change in relevant legislation.
Appendix A - Roles and Responsibilities

The Board of the Faculty of Occupational Medicine (The Board)
The Board is responsible for appointing the Responsible Officer and ensuring that
he/she has sufficient resources to discharge his/her responsibilities under the Medical
Profession (Responsible Officers) Regulations 2013 and the Medical Profession
(Responsible Officers) (Amendment) Regulations 2013.

The Board shall receive an annual report of Revalidation and Appraisal activities and
is invited to comment on the arrangements for ensuring effective appraisals. It shall
confirm that it is satisfied that the appropriate arrangements are in place and
authorise completion of the statement of compliance required by NHS England.

The Board shall receive regular reports on the number of appraisals scheduled and
completed.

Responsible Officer
The Responsible Officer has overall responsibility for the effective implementation and
operation of appraisals for all doctors with a prescribed connection to the FOM and is
responsible to the FOM Board through the Academic Dean (Deputy President). The
post holder will undertake regular quality control checks to ensure the appraisal
documentation submitted meets the agreed standards.

It is the responsibility of the Responsible Officer to make revalidation
recommendations to the General Medical Council.

Clinical Appraisal Lead/Lead Appraiser
The role of SOM Clinical Appraisal Lead is to provide overall leadership and support to
the whole medical appraiser workforce, coordinating guidance, educational and
benchmarking opportunities and performance review to all appraisers engaged by
the office. Working closely with the SOM Medical Appraisal Manager, senior
appraisers/SOM Quality Management Group and other appraisal office colleagues,
the Clinical Appraisal Lead will promote, support and facilitate the implementation of
national and local appraisal policies and ensure a robust quality assurance process is
implemented for medical appraisals.

Appraisers
The SOM Appraisers are licensed doctors with knowledge of occupational medicine,
selected and trained by the SOM in line with the numbers required to provide a timely
service and using a fee for service contract model. Their training meets the
requirements of the NHS England Revalidation Appraiser Training and Support
framework (http://www.england.nhs.uk/revalidation/appraisers/app-train-sup/) and
they will adhere to the FOM’s Appraisal Policy to:

- organise all their appraisals within the appraisal timeframe
- review appraisal documentation and evidence before the appraisal interview
takes place, identifying key areas for discussion
- complete the necessary declarations in PReP
• complete the mandatory FOM questions required of appraisers
• ensure all forms are processed as required on completion of the appraisal interview including the signing off of the PDP by both parties within 28 days of the appraisal meeting
• highlight any issues the appraisee may have in revalidating
• undertake appraisal training and attend periodic updates as required, at least every three years
• organise their own appraisal in a timely manner

The SOM will provide a description of the selection process for appraisers, together with a Job Description of the required competencies and person specification.

The SOM will arrange for training, in line with the guidelines, for all new appraisers; and updated training for existing appraisers. There will be a probationary period/early review of skills for all new appraisers. The SOM will obtain appraisee feedback on the performance of all its appraisers.

All appraisers have indemnity under the Society’s Directors’ and Officers’ insurance policy. They are also advised to check that their professional indemnity for their work also covers their medical appraiser role as this is a source of additional support for appraisers.

Appraisees (doctors undergoing appraisal)
Appraisees are responsible for ensuring that they participate in the annual appraisal cycle to meet the requirements of Revalidation. They are required to maintain a professional portfolio including feedback from each of their employers (whole practice review), records of their training, reflective practice and additional documentation as specified by the GMC and FOM including records of their Continuing Professional Development (CPD), evidence from Multi Source (360°) Feedback and the FOM’s Appraisee Clinical Governance questionnaire. This evidence must be available to their Appraiser two weeks before the date of the appraisal. Failure to do so may result in the appraisal meeting being rearranged.

Appraisees should ensure that all forms are processed as required on completion of the appraisal interview including the signing off of the PDP by both parties within 28 days of the appraisal meeting.

Professional Development Manager
The Professional Development Manager will oversee the Revalidation Appraisal process and ensure that related procedures and practices are regularly reviewed in line with changes in legislation. The post holder will co-ordinate and provide administrative support to the appraisal and revalidation process. The post holder will maintain the records/electronic data system and ensure that the systems in place are held securely.

The Professional Development Manager has delegated responsibility from the Responsible Officer for ensuring that the NHS England Annual Organisational Audit
and Quarterly Information for the FOM and for the other organisations who contract the services of the RO are completed and submitted accurately and on time.

In addition, the Professional Development Manager will provide the day-to-day liaison with the SOM and make all reasonable efforts to ensure that each doctor with a prescribed connection to the FOM participates in an annual strengthened medical appraisal and that the appraisal is ‘closed’ in a timely manner.

**Appraisal Manager**

The SOM Appraisal Manager will be supported by a SOM appraisal administrator. The Appraisal Manager will maintain a database of trained appraisers to ensure that there are sufficient numbers to meet the needs of the medical workforce and allocate trained appraisers to the doctor to be appraised. The Appraisal Manager will ensure that appraisers are trained in accordance with the guidance provided by the NHS Revalidation Support Team and that update training is provided every three years.

It is the responsibility of the SOM to allocate appraisers. Appraisees may not choose their appraiser. Appraiser allocation is based on the availability of trained appraisers within the geographical location of the appraisee and by the FOM qualification held by both appraisee/appraiser.
Appendix B – Supporting Documents

General Medical Council

- Revalidation web pages http://www.gmc-uk.org/doctors/revalidation.asp

NHS England

- Relevant revalidation web pages https://www.england.nhs.uk/revalidation/

Academy of Medical Royal Colleges


Faculty of Occupational Medicine

- Revalidation web pages http://www.fom.ac.uk/professional-development/revalidation
- Elements of revalidation http://www.fom.ac.uk/professional-development/revalidation/elements-of-revalidation
- Appraisee clinical governance questions http://www.fom.ac.uk/professional-development/revalidation/additional-guidance
- Appraiser statutory questions http://www.fom.ac.uk/professional-development/revalidation/additional-guidance
- Appraisal and revalidation checklist http://www.fom.ac.uk/professional-development/revalidation/revalidation-resources
- Tips on writing effective reflective notes http://www.fom.ac.uk/professional-development/revalidation/elements-of-revalidation/reflection
- Updates from the FOM Responsible Officer http://www.fom.ac.uk/professional-development/revalidation/previous-revalidation-updates
- Model appraisal input form – December 2013 http://www.fom.ac.uk/professional-development/revalidation/previous-revalidation-updates
- Model appraisal output form – December 2013 http://www.fom.ac.uk/professional-development/revalidation/previous-revalidation-updates
- FOM guidance on safeguarding http://www.fom.ac.uk/professional-development/publications-policy-guidance-and-consultations/guidance

Society of Occupational Medicine

- Appraisal application form https://www.som.org.uk/request-appraisal
• Appraisal FAQs [https://www.som.org.uk/member/annual-appraisal-scheme](https://www.som.org.uk/member/annual-appraisal-scheme)