Medical Appraiser Role Description

In Scotland

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**VERSION: 0.3**

**Recruitment and employment of medical appraisers is managed locally by the health boards – this document is intended as an example for boards to adapt for local use.**

Medical revalidation is the process by which all doctors in the UK undertake to renew their licence to practice with the GMC. Central to this 5-year process is the doctors’ engagement with annual appraisals.

In Scotland, to ensure a consistency in approach and quality, it was agreed by the national steering group that NHS Education for Scotland (NES) would be the provider of appraiser training for those doctors who wish to take up the role of a medical appraiser.

This document describes the role of the medical appraiser in Scotland. There are some nuances between primary (GPs) and secondary care appraisers and this is highlighted where applicable.

Items highlighted in yellow require health board clarifications.

# Section 1: Role Purpose

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| **Post Title** | Medical Appraiser |
| **Accountability** | You will be employed by your health board so please discuss with your Appraisal Lead. |
| **Purpose** | Medical appraisal is a formative and developmental process allowing doctors to reflect on their whole scope of practice. The appraiser’s role is to act as a peer appraiser of their colleagues, using the communication skills and processes that are standard to the national appraisal scheme.Annual appraisal (along with other information available to the RO) also helps inform the General Medical Council’s (GMC) five-yearly revalidation process, developed to ensure that individual doctors can demonstrate positively that they remain fit to practise. |
| **Commitment** | As agreed with employing NHSScotland health board. |

# Section 2: Duties and responsibilities

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|  | To conduct appraisals according to the aims and objectives of the medical appraisal scheme in Scotland. |
|  | To familiarise yourself with [Medical Appraisal Scotland website](https://www.appraisal.nes.scot.nhs.uk/) (including [SOAR](https://online.appraisal.nes.scot.nhs.uk/)).  |
|  | To manage time effectively that allows for the support, meeting and documentation for each appraisee. |
|  | Where applicable, link with university appraiser for joint appraisal with clinical academics. |
|  | To prepare for the appraisal by reviewing materials the appraisee has submitted, with adequate time to contact the appraisee should further information be needed. |
|  | To support and appropriately challenge the appraisee in their reflections re their practice; and provide feedback / guidance re the quality of supporting information submitted. |
|  | To complete all appraisal documentation (e.g. Form 4, Form 6 etc) in a timely manner (typically no longer than 2 weeks post-appraisal); including… |
|  | To agree PDP with appraisee and document on Form 4 following the appraisal. |
|  | To encourage appraisees’ completion of feedback (Form 6A) at conclusion of appraisal; and complete your own Form 6B as appraiser.*(Anonymised feedback report is collated on SOAR for you to use as a reflective resource.)* |
|  | Where appliable, discuss with the local Appraisal Lead and complete a Notification of Non-Participation in Appraisal (Form 5) for every appraisal that is not completed:* Form 5A is for exemption from appraisal (e.g. mat leave, sabbatical, sick leave etc)
* Form 5B is for non-engagement
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|  | To observe the guidelines on Data Protection and Confidentiality at all times. |
|  | To attend at least one national appraisal review or local training meeting per annum (e.g. NES Appraiser Conference; NES Refresher programme). |
|  | Regardless of an annual review, all appraisers are encouraged to reflect on any feedback received; and discuss their appraiser role as part of their own whole-practice appraisal. |

Remember, appraisal is a supportive tool designed to aid the development of your peers. If you are unsure about how to resolve particular challenging appraisal situations, please contact the local Appraisal Lead(s) for help and support.

# Section 3: Personal Specification

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|  | **Essential** | **Desirable** |
| **Experience** | * Must work and appraised in the local health board area unless otherwise specified.

*For primary care (GP) appraisers:** Must be a trained GP working an average of at least 2 clinical sessions in general practice per week (or equivalent) or within 3 years of retirement from that clinical activity.
* Must have a minimum of 2 years post qualifying experience as a GP.

*For secondary care appraisers:** 10 years since completion of primary medical degree
 | * Involvement in medical education or training
* Been appraised in Scotland (via SOAR) at least once
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| **Qualifications / Registration** | * Medical Degree
* Registered with the GMC
* GMC Licence to Practice
* Completion of Appraiser Training

*For primary care (GP) appraisers:** *MRCGP*
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| **Knowledge / Skills** | * The interpersonal and communication skills necessary to conducting an effective, supportive peer appraisal including skills in listening and giving effective feedback.
* Effective time management and general organisational skills.
* Able to word process, use email and browse internet resources.
* Able to write clear, succinct reports.
* Understanding of the appraisal process.
* Understanding of the revalidation process.
* Understanding of the equality and diversity issues relevant to the role.
 | * Giving feedback, providing challenge
* Understanding of learning needs assessment
* Knowledge of local professional development and education structures
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| **Disposition** | * Credible with the local medical profession.
* Commitment to the principles of appraisal.
* Sensitivity to the issues likely to face colleagues and issues of confidentiality.
* Approachable.
* Willing to work constructively with colleagues reluctant to undergo appraisal.
* Committed to own ongoing personal development.
* Motivated and conscientious
* Be respectful and professional to colleagues
 | Be comfortable with cross-specialty appraisals |