

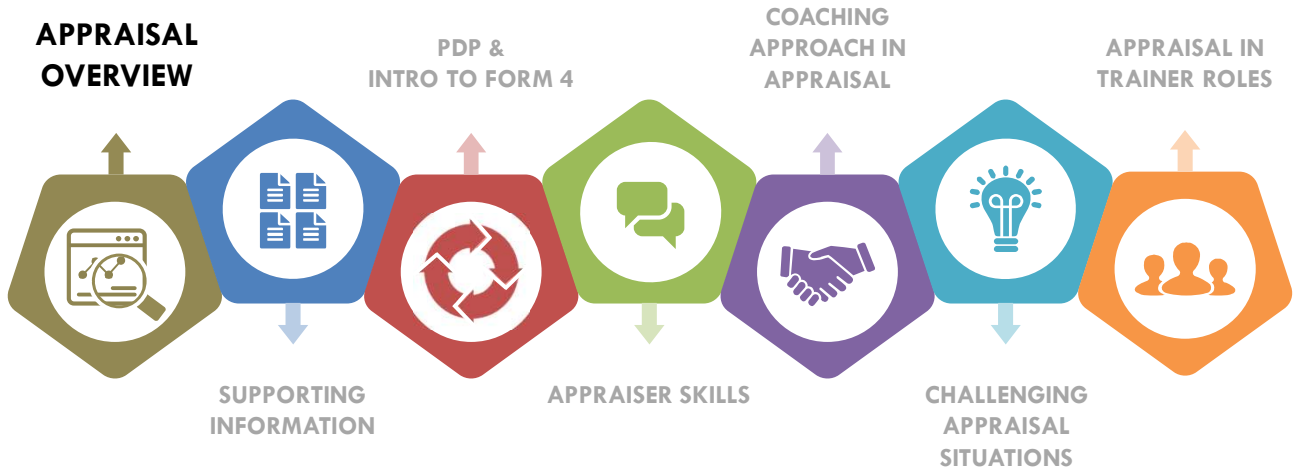


[Audio transcription of module 1]

Appraisal Overview

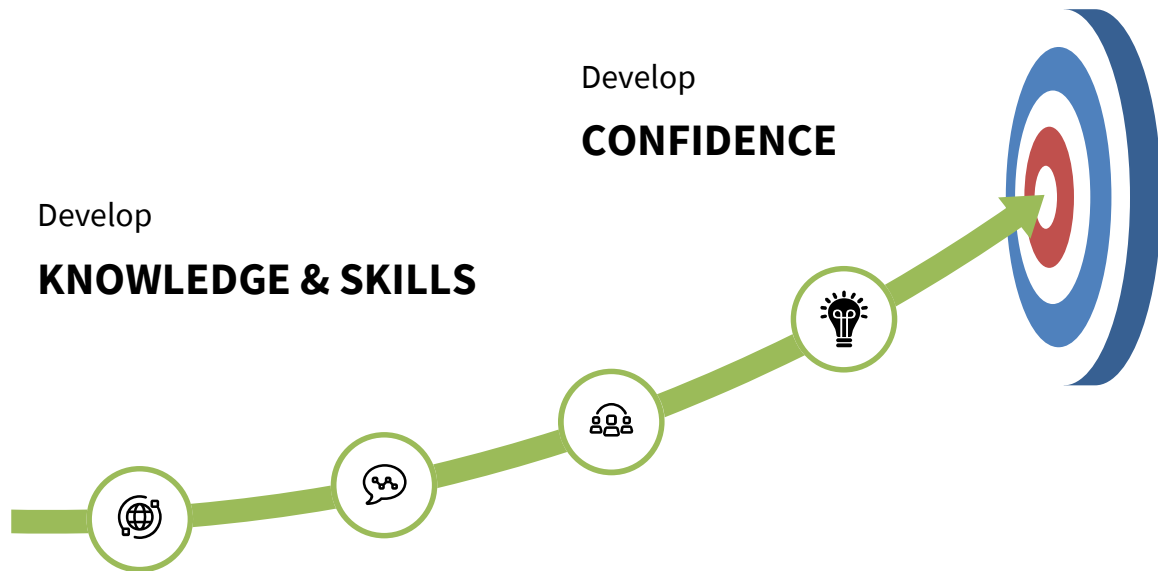
Module 01

Welcome to the Medical Appraisal Scotland New Appraiser training. This is module 1, an overview of Medical Appraisal in Scotland.

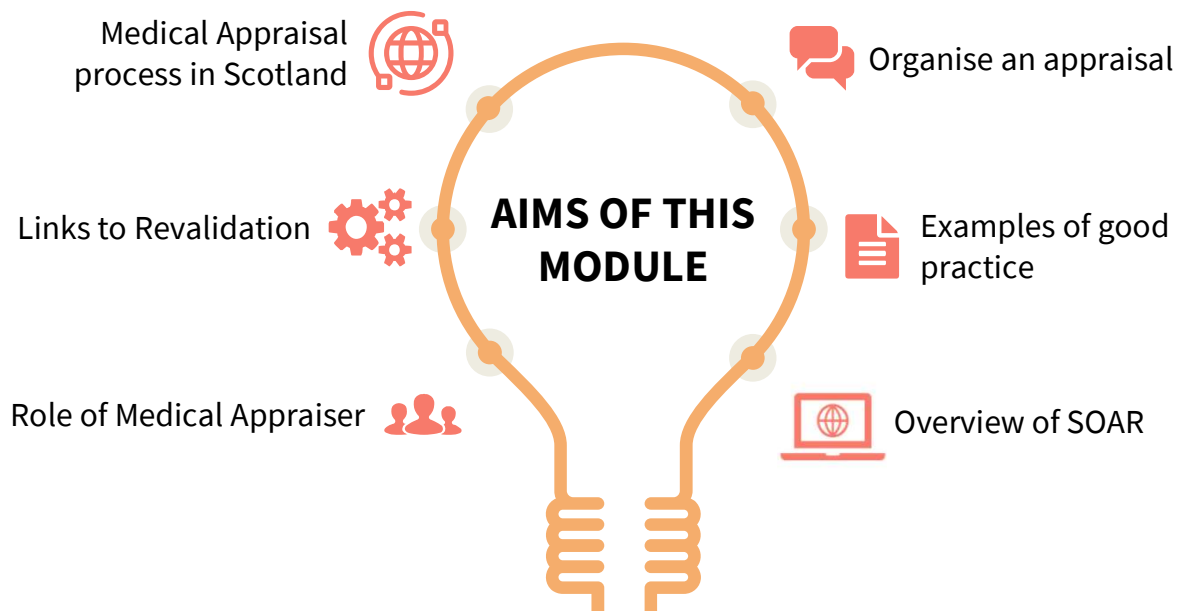


As a prerequisite for attending the NES New Appraiser training, potential participants are asked to complete a suite of online modules - of which this is one of them - as preparation for the large and small group discussions.

Aims of the training course



The aims of our training course is to help develop your knowledge and skills to become an appraiser, and to give you the confidence to take on the Medical Appraiser role in Scotland.



This module is intended to give the learner an overview of the Medical Appraisal process in Scotland, how it links into Revalidation, and the role the Medical Appraiser plays.

This module also aims to give the learner an understanding of what to look out for when organising an appraisal, and some examples of good practice. We will conclude this module with an overview of the appraisal process via SOAR from an Appraiser's point of view.

Consider...



What the main role of the appraiser is

What the role of the appraiser is in revalidation

Use provided workbook

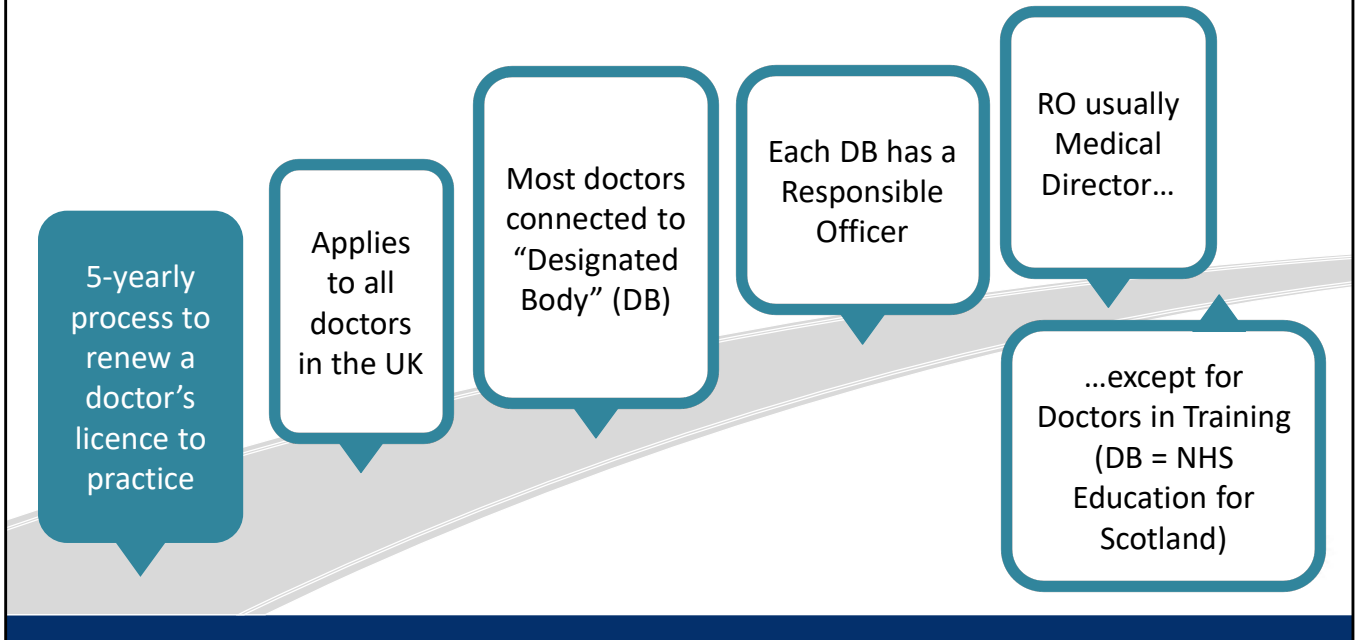
As you go through this and other modules, you will be asked to reflect on various topics, please use the workbook provided to collate all your notes.

To start with, consider the role of the appraiser and how this fits in to supporting the appraisee and helping them prepare for revalidation.

You can also use the workbook to jot down any questions or queries you may have which you can refer to when you attend the New Appraiser training course.

What is...
Revalidation and Appraisal?

Background – Medical Revalidation

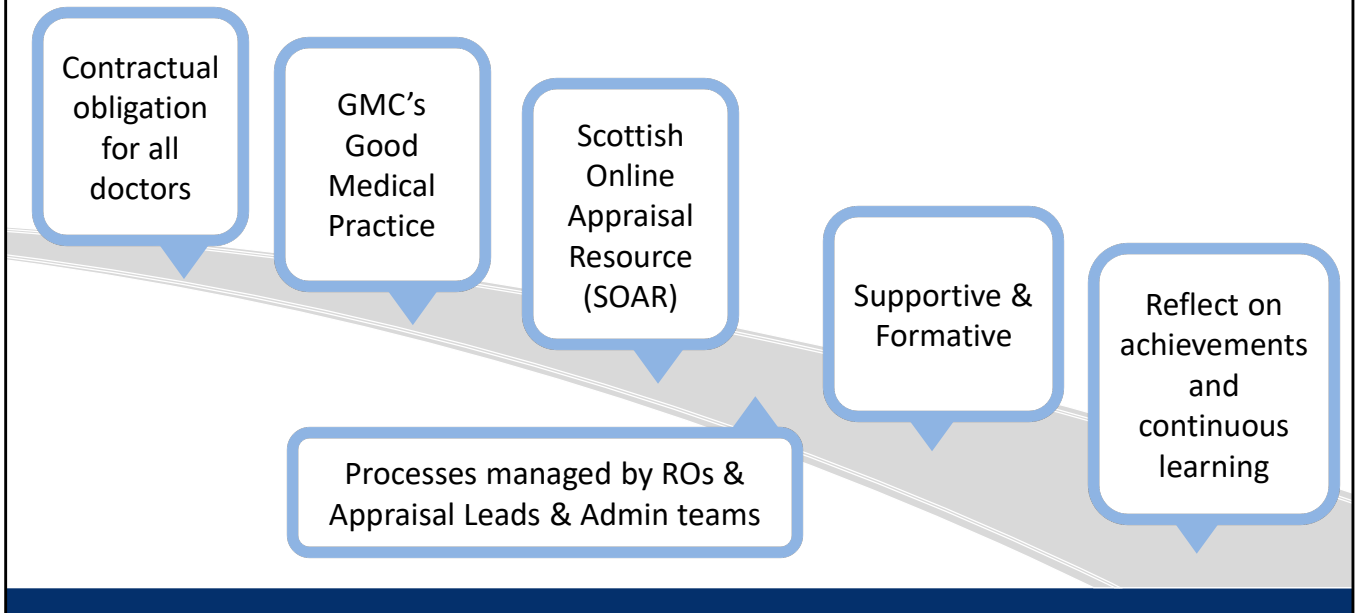


Medical Revalidation is a 5-yearly process to renew a doctor's licence to practice. It was officially launched in 2011/12; and this applies to all doctors in the UK who hold a licence to practice.

Most doctors will be connected to a "Designated Body" for the purposes of revalidation. If for whatever reason they don't have a designated body to connect to, for example: if they are mainly cruise ship doctors... then, they can be revalidated through the GMC directly.

Each Designated Body must have a "Responsible Officer" who makes the Revalidation recommendations to the GMC. In NHS Scotland, the RO is usually the Health Board's Medical Director; except for Doctors in Training - so long as they are in a training programme, NHS Education for Scotland is the Designated Body for all trainees in Scotland.

Background – Medical Appraisal



Central to Revalidation is the annual Medical Appraisal process – a contractual obligation for all doctors which began around 2002. The process and its documentation are based on the GMC's Good Medical Practice. Medical Appraisal in Scotland is managed through an online system called SOAR and is developed and maintained by NES.

NES provides national support to all health boards in Scotland, who manages the process locally through ROs, Appraisal Leads and Admin teams.

Annual appraisal is a supportive and formative process, designed to encourage doctors to reflect on their achievements and continuous learning and development.



Let's take a look at the appraisal processes in Scotland.

When a doctor joins a health board, they are manually added to SOAR by the local administrative teams after their details have been verified by the local HR team. They are assigned an appraiser designated by the admin team and the Appraisal Lead. They can request a change if there is a conflict of interest or are close socially. For example, they could be neighbours, or were in a previous (or current) relationship etc.

It is up to the appraiser and appraisee to organise their own schedule and agree the meeting date, time and location. Once agreed, the Appraiser logs the meeting details onto SOAR, and the Appraisee is asked to complete and submit the appraisal forms for sharing prior to meeting.

After the appraisal meeting, the appraiser drafts the summary of the discussions into Form 4. This is then forwarded to the Appraisee for their review and approval; or they can make a change request if they don't agree with the wording or content. When Form 4 is approved by the appraisee, that is when the appraisal is concluded.



Confidentiality

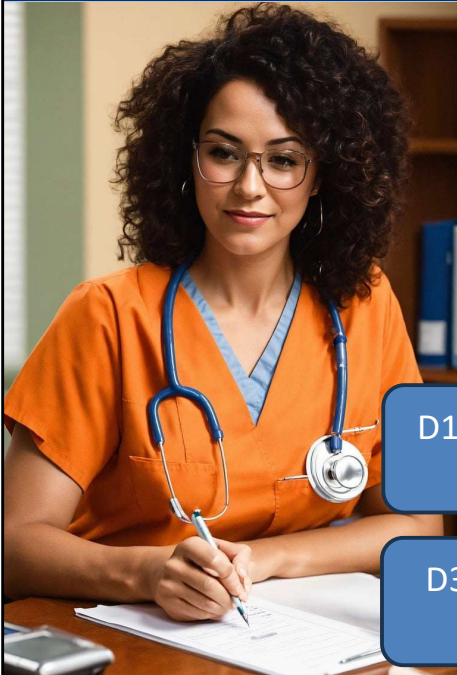
- Appraisal opening discussion
 - “What do you think this is?”
 - “**Confidential between Appraiser and Appraisee...**
 - *...unless significant impact on patient safety*”
- Appraisal forms are confidential...
 - RO could request access (but appraisee to grant permission)
- Form 4 summary available to:
 - Appraisee, current assigned Appraiser, Appraisal Lead and RO
- Form 7 (ROT) available to DMEs and EOs
 - Auto-created from ROT info only on Forms 3 and 4

Image 8275 from nhsscotlandphotalibrary.org

At the start of the appraisal meeting, appraisers usually begin by discussing the confidentiality. You may wish to open the appraisal by asking what the appraisee understands by confidentiality... or you could explain that everything discussed is confidential between the Appraiser and Appraisee - the only exception is if, during the discussions, something was disclosed which would have an impact on patient safety.

Everything submitted to an appraisal is also confidential between the Appraiser and the Appraisee; but the RO or Appraisal Lead could request to view this via request functions on SOAR. Form 4, which documents the summary of the appraisal discussions, is accessible to the Appraisee, their current assigned Appraiser, their Appraisal Lead and their Responsible Officer.

A separate Form 7 is created automatically for those Appraisees with a Trainer role. This is available to the Directors of Medical Education and the Educational Organisations for Recognition of Trainer purposes. Form 7 is created by pulling ROT information submitted by the Appraisee, and the Appraiser comments on ROT on Form 4. But neither the DME or the EO have access to any other parts of the appraisal forms. This is discussed further in module 7.



Appraisal Forms and GMC Domains

- Background Info
- The Job You Do
- Appraisal Supporting Information

D1: Knowledge, skill and development

D2: Patients, partnership and communication

D3: Colleagues, culture and safety

D4: Trust and professionalism

Image 8500905 from pixabay.com

Appraisees are asked to provide background information and the job they do as part of their annual appraisals, as well as submitting appropriate supporting information on the GMC's Good Medical Practice Domains, which are:

Domain 1: Knowledge, skill and development

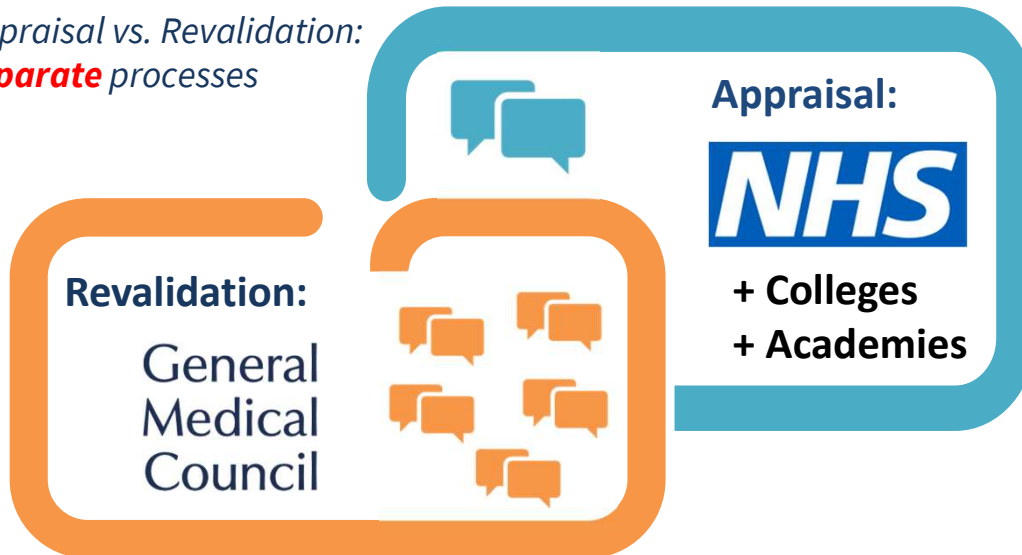
Domain 2: Patients, partnership and communication

Domain 3: Colleagues, culture and safety

Domain 4: Trust and professionalism

Supporting Information requirements ^(1/2)

Appraisal vs. Revalidation:
separate processes



It is important to note that whilst they are intrinsically linked, medical appraisal and revalidation are separate processes.

Requirements for Revalidation, which is a 5-yearly process, are set by the GMC; whilst annual appraisal requirements are set out by the health boards. Colleges and Academies provide additional guidance that can help appraisees select appropriate evidence in their area.

Supporting Information requirements (2/2)



Supporting information expected in appraisals are aligned to revalidation.

More information and guidance on Supporting Information will be provided in module 2. But the supporting information expected are:

- Continuing professional development
- Quality improvement activity
- Significant events
- Feedback from patients or those to whom you provide medical services
- Feedback from colleagues
- Compliments and complaints

Supporting information for appraisal and revalidation	Domain 1	Domain 2	Domain 3	Domain 4
Continuing professional development	x			
Quality improvement activity	x			
Significant events			x	
Feedback from patients		x		
Feedback from colleagues			x	
Compliments and complaints		x		
PDP and PDP review	x			
Health statement			x	
Probity statement				x
Recognition of Trainer (RoT)			x	

Supporting Information will be explored further in module 2. This table highlights which GMC Domain each supporting information should go under.

Please note for the purposes of **revalidation, QIA, Feedback from Patients, and Feedback from Colleagues are expected once in a 5-year cycle. The others are expected annually at appraisal.**



It is important to remember that appraisers do NOT carry out appraisals on behalf of the GMC – they do this on behalf of the employing health board.

The role of the appraiser is, and always has been, to facilitate the reflective discussions of their appraisees' continued learning and development, their achievements and wellbeing, and help them reflect on their practice and what areas to improve. Appraisers are also asked to accurately document the summary of the appraisal discussions on Form 4.

Appraisers are NOT there to tell the Appraisees what to do. It is not a performance review, nor is it a job planning meeting - that is the responsibility of the appraisees' line manager, which you are not and should not be. Appraisers are not responsible for their appraisees' revalidation either. It is the Responsible Officers' responsibility to recommend the designated body's doctors for revalidation; and most crucially, appraisers are most certainly NOT the "GMC Appraisal police".

Remember, appraisal is designed to be a supportive process, **irrespective** of Revalidation requirements.

Quick knowledge
check...



In your own words,
describe the role of the appraiser.

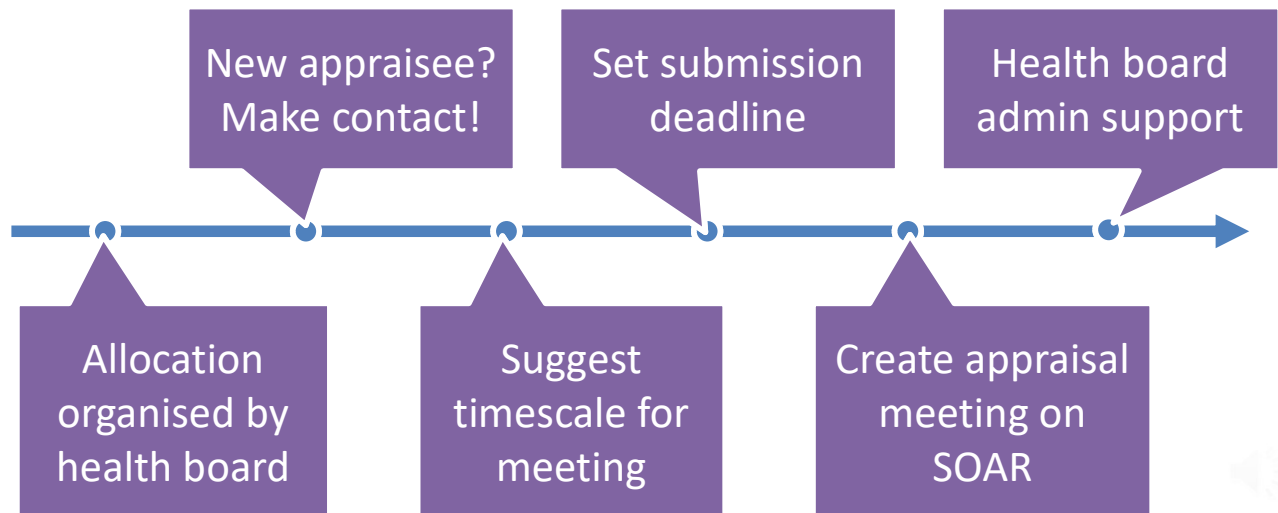
Use provided workbook

Using the workbook provided, please describe in your own words the role of the appraiser.

Organising an appraisal

This part of the module is intended to give you an understanding of what to look out for when organising an appraisal and share some examples of good practice provided by experienced appraisers.

Organising an appraisal



The Appraiser / Appraisee pairings are organised locally by the health boards. If or when you have been allocated a new appraisee who you don't know - make the first contact and introduce yourself and suggest a timeframe for the appraisal meeting.

Once the appraisal meeting has been agreed, suggest a timeline for the appraisee to submit their appraisal documents. For example, perhaps 1 or 2 weeks before the appraisal meeting... just make sure you are both comfortable with this.

Please note - as the Appraiser - **you** will need to login to SOAR to create the appraisal once the meeting date, time and location has been agreed.

Appraisees can collate their appraisal documents and complete the appraisal forms at any time throughout the year, but they won't be able to share them until you - or the local admins - have added the meeting to SOAR.

Some health boards have full-time administrative support, and they may organise appraisal meetings for you, but **usually** this is organised between appraiser and appraisee. For clarifications, best check with your health board teams in the first instance.

Importance of agreeing submission timescale



- Helps focus and work towards a submission date
- Avoid “LastMinute.com”
- Chasing up appraisees’ documents
- Factor in time for you to review documents
- Agree an agenda with your appraisee prior to meeting

This Photo by Unknown Author is licensed under CC BY-SA-NC

The point of setting a target date for your appraisee is to help them focus and work towards a submission date so not to leave things until the last minute. Many appraisers have reported issues with chasing up appraisees’ documents – get ahead of this by agreeing a timeframe to work towards.

Once the documents have been submitted you will need review time – factor this in your timescale to allow you time to prepare for the appraisal... and aim to agree an agenda prior to the meeting.

Importance of setting an agenda



- Brings focus to appraisal discussions
- Opportunity to highlight topics for discussions
- Identify areas for challenge
- Appraisee's agenda vs. Appraiser's agenda
- Manage expectations if large submission
- Allows appraisee reflection: what's important?
- Appraisee focussed

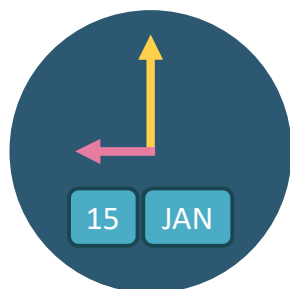
Image 6587736 from pixabay.com

The agenda is designed to help both you and your appraisee to focus on key areas to discuss during the appraisal meeting. From your point of view as the appraiser, the agenda should help you consider what issues you might have to challenge and how to prepare for it... however, be mindful that this is your appraisee's appraisal and whilst you may wish to discuss certain things that has emerged from the submitted documents, they may have other things they wish to discuss in confidence.

Another useful purpose of the agenda is where an appraisee has submitted excessive amounts of documents for you to review. You can legitimately ask your appraisee "Which of these areas would you like to focus on?" - this allows the appraisee an opportunity to reflect on what's important/pressing to them. Equally if there are gaps in the submission, you can chase this up with the appraisee to make sure they are available prior to meeting.

Remember, it's the appraisee's appraisal, focus on them and make sure they are happy with the meeting agenda.

Protected space and time



- Set aside dedicated and protected time
- Private uninterrupted space (where possible)
- “Remote” appraisal
- Submit documents to SOAR ahead of time

According to the 2020 Scottish Appraiser Survey, the chance for a confidential discussion with a trained peer in a private and protected environment remains one of the most valued aspects of appraisal.

Whether you are having an appraisal via online tools such as Microsoft Teams, or you are meeting in-person, make sure you and your appraisee both set aside dedicated and protected time, and in a private space where you will not be interrupted.

If you are having a “remote” appraisal via online video conferencing tools, make sure both you and your appraisee are comfortable with the chosen technology and all documents are submitted to SOAR ahead of time. This is to ensure you both have access to the same source material for discussion.

Reschedule?



- Unavoidable – but accommodate if possible
- Insufficient information? Ask first...
- Separate additional meetings?
 - *Do not sign off the Form 4.*
- Seek guidance from your Appraisal Lead
- **Do NOT exceed GMC requirements for Revalidation**

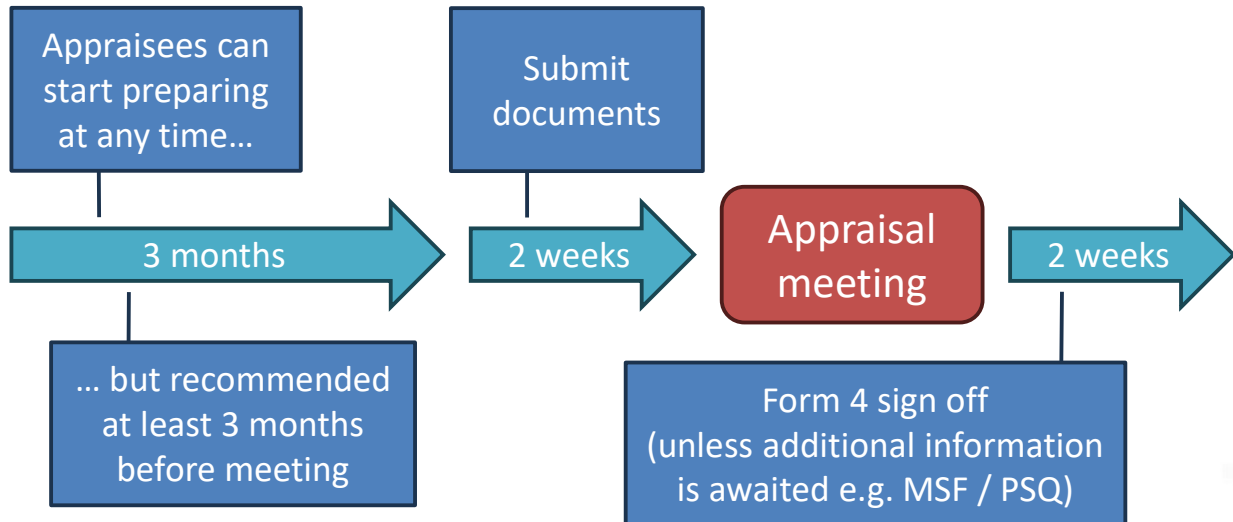
You are all busy clinicians, so sometimes rescheduling is unavoidable. Try to stick to the agreed date and time if possible, but be accommodating if not.

There might be occasions where a lack of supporting information to conduct a meaningful discussion would force you to consider rescheduling. Ask the appraisee for the missing information first or, if applicable, consider proceeding with the meeting and discuss what you would expect to see at the next appraisal. It could be that the appraisee may not have everything available in time and further meetings are required. For example MSF, which typically takes around 3 weeks to collate via the 3rd party software on SOAR; or PSQ which can take several months to collate. In either case you may need further, albeit shorter meetings, to discuss these as and when they become available.

If this is the case, **please do not sign off the Form 4** until you are satisfied that everything is included in the appraisal. If the situation escalates, for instance, repeatedly rescheduling due to lack of supporting information - then you may have to seek guidance from your Appraisal Lead.

BUT... keep in mind however, that **you are not asking for more than is required for the purposes of medical revalidation.**

Appraisal Timetable

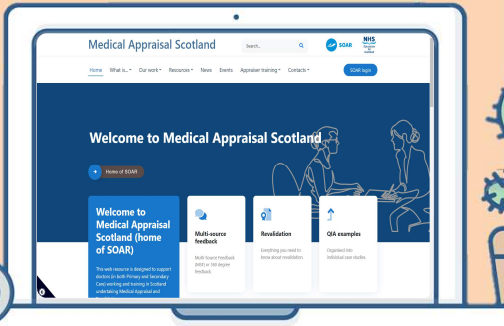


Appraisees can start preparing for their annual appraisal at any time throughout the year. It is recommended that Appraisees start prepping for their appraisals at least 3 months in advance of the arranged meeting.

All submitted appraisal documents should ideally be submitted at least 2 weeks prior to agreed meeting to allow you time to review.

The appraisal should ideally be signed off, via Form 4, no later than 2 weeks after the appraisal meeting – you want to get the Form 4 signed off whilst everything is still fresh in your minds; unless a further meeting is needed to discuss additional information, such as MSF or patient surveys. If this is the case, just make sure you do NOT sign off the Form 4 until all information is there.

Supporting the appraisee and you



- Medical Appraisal Scotland website:
 - www.appraisal.nes.scot.nhs.uk
- SOAR helpdesk
 - SOAR@nes.scot.nhs.uk
- Appraisal Lead:
 - www.appraisal.nes.scot.nhs.uk/contacts/appraisal-leads.aspx

Image 2298286 from pixabay.com

If you haven't heard from your appraisee and it's close to deadline date, send them a message to check in on them. There may be instances where you need to provide your appraisee with some guidance on different aspects of the appraisal process, such as MSF or PSQ or QIA examples.

Signpost them to the Medical Appraisal Scotland website for more information as needed or contact the SOAR helpdesk. You can also seek further support from your Appraisal Lead as appropriate.

Quick knowledge check...



What might you do (as appraiser) to avoid the appraisees becoming “LastMinute.com’ers”?

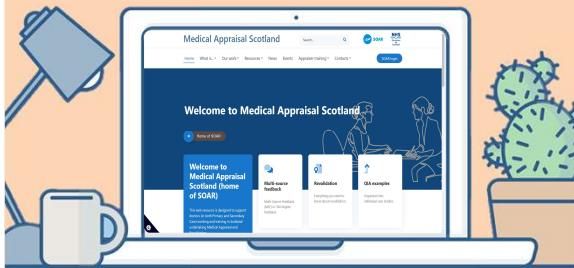
Consider some non-engagement behaviours... what would you do if your appraisee fails to engage?

Use provided workbook

Consider these questions and reflect on them in preparation for attending the training course:

- What might you do, as an appraiser, to avoid the appraisees becoming a LastMinute.com?
- Consider some non-engagement behaviours – what would you do if your appraisee fails to engage?

Please use the workbook provided.

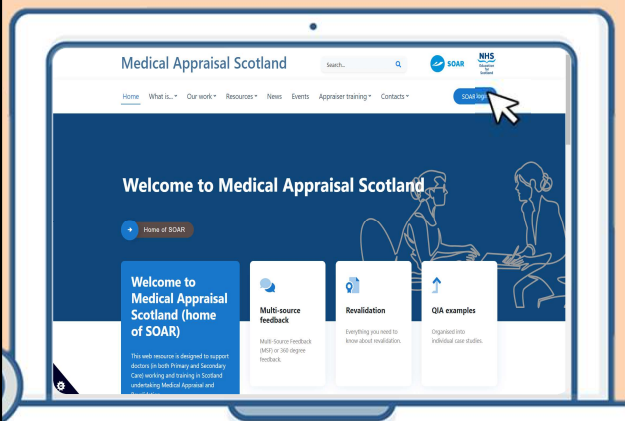


Overview of SOAR

Appraiser perspective

This next part of the module covers the web resources available to you, in particular the processes around SOAR, Scottish Online Appraisal Resource – the online system used in Scotland to manage medical appraisals.

Medical Appraisal Scotland



- www.appraisal.nes.scot.nhs.uk
- Information resource for Appraisal and Revalidation
- Appraisal Toolkits
- Reflective Templates
- QIA examples
- Appraiser resources

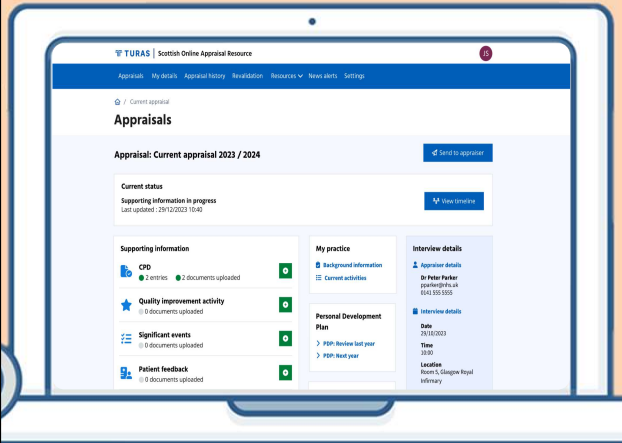
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The main information point for all things appraisal and revalidation in Scotland is the Medical Appraisal Scotland website: www.appraisal.nes.scot.nhs.uk

As well as general information about appraisal and revalidation processes in Scotland, this website also has Appraisal toolkits, reflective templates and a QIA library to aid the appraisee. There are also specific Appraiser resources too.

Sitting at the heart of this website is SOAR.

Scottish Online Appraisal Resource

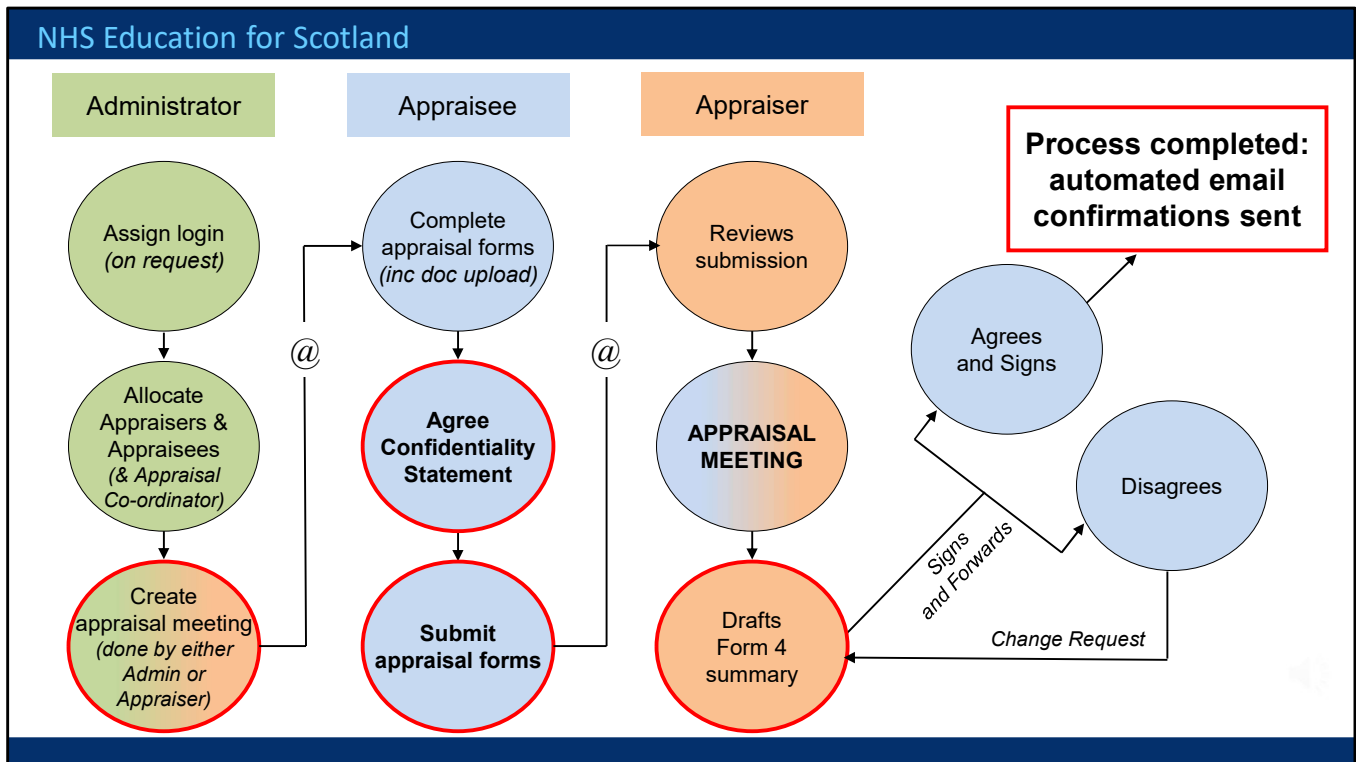


- SOAR (tool / application)
- Web-based national tool
- Management tool to aid health boards
- Online appraisal forms
- Uploading supporting information

Image 2298286 from pixabay.com

SOAR is a web based national tool for Appraisers, Appraisees and Health board management teams to access and facilitate the appraisal process. Core to this is the online appraisal forms for appraisees to complete and upload documents to share with their appraiser prior to their appraisal meeting.

Let's take a closer look at the processes.



There are 3 key user roles on SOAR, the Administrator, the Appraisee and the Appraiser.

The administrator is responsible for dealing with login requests as only the local teams can verify the users through health board HR protocols. They work closely with the Appraisal Leads to allocate appraisers to appraisees. They are also responsible for allocating appraisal co-ordinators on the system. The Appraisal Co-Ordinator role is used by health boards to manage larger specialty groups, regions or non-medics where the appraisal admin processes have been delegated, for example, dental, public health etc. Appraisal co-ordinators have equal access to health board admins except they are restricted to those who they have been assigned to.

Once the appraiser and appraisee are paired up, it's then up to them to liaise with each other to organise appraisal meeting date, time and location. Once agreed, it's the Appraiser's responsibility to then add the meeting to SOAR. Some health boards have dedicated admin support and it might be that they would organise this as part of their role to manage the local appraisal calendar. Check with your local admin team on local protocols if you are unsure.

Once the meeting is added, the system can trigger an email to the Appraisee confirming the meeting details. Appraisees can then begin to work on the completion of their appraisal forms and collating of supporting information, although this can be done at

any time irrespective of the appraisal meeting details being added to the system.

When the appraisee is ready, they need to agree to the confidentiality statement, and then submit all completed forms to the appraisal. Once submitted, an email is triggered to the Appraiser so they know that documents are available and ready for review. Please note until documents are submitted by the appraisee, you, as the appraiser, won't be able to access any of their forms.

Once documents have been submitted and reviewed, and the agenda agreed, you would proceed with the appraisal meeting itself.

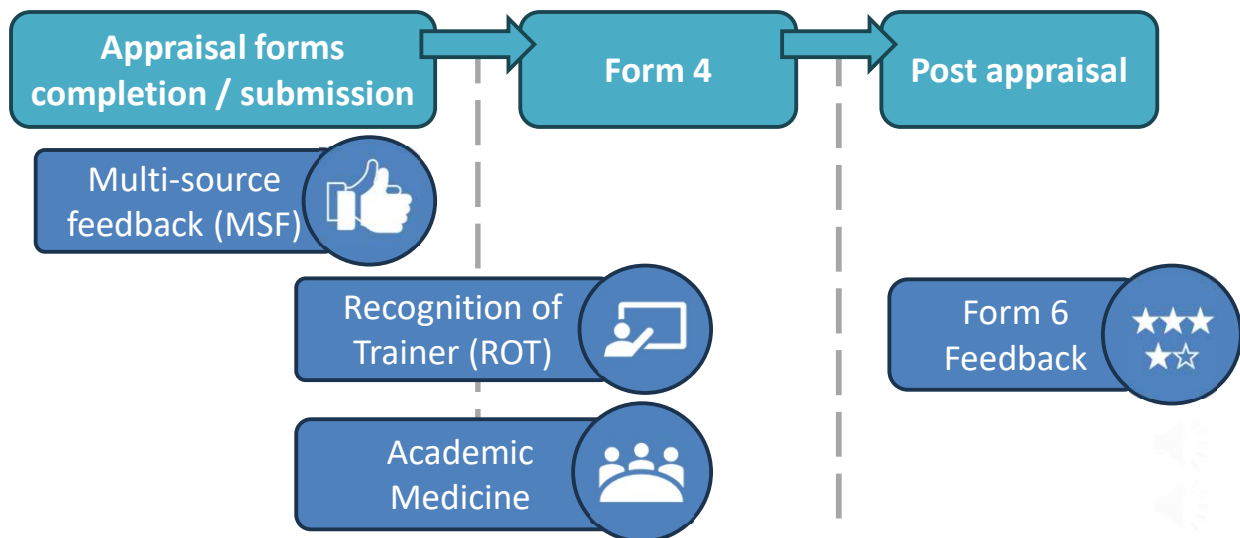
After the meeting...

It is your responsibility as the Appraiser to then draft the summary of the discussions on the Form 4. When you have completed your draft, it is forwarded to the Appraisee for their review. Once forwarded, you will not be able to make any further edits.

If the Appraisee wished to make amendments to the Form 4 content, they would reject the Form 4 via the "Change Request" function. They will be prompted to detail the changes they would like to make, and you will receive an email notification of this. You would review and make the appropriate changes and re-forward the Form 4 on. This loop between Appraiser and Appraisee will continue until such time the Appraisee is happy with the Form 4 and signs it off.

Once signed off, the appraisal process on SOAR is marked as completed and automated emails are then sent to Appraiser, Appraisee and local admin teams to confirm the conclusion of the appraisal.

Linked processes



There are other linked processes to SOAR, such as Multi-source feedback, Recognition of Trainer, Academic medicine, and Form 6 feedback. Let's see where they all fit into the overall SOAR processes.

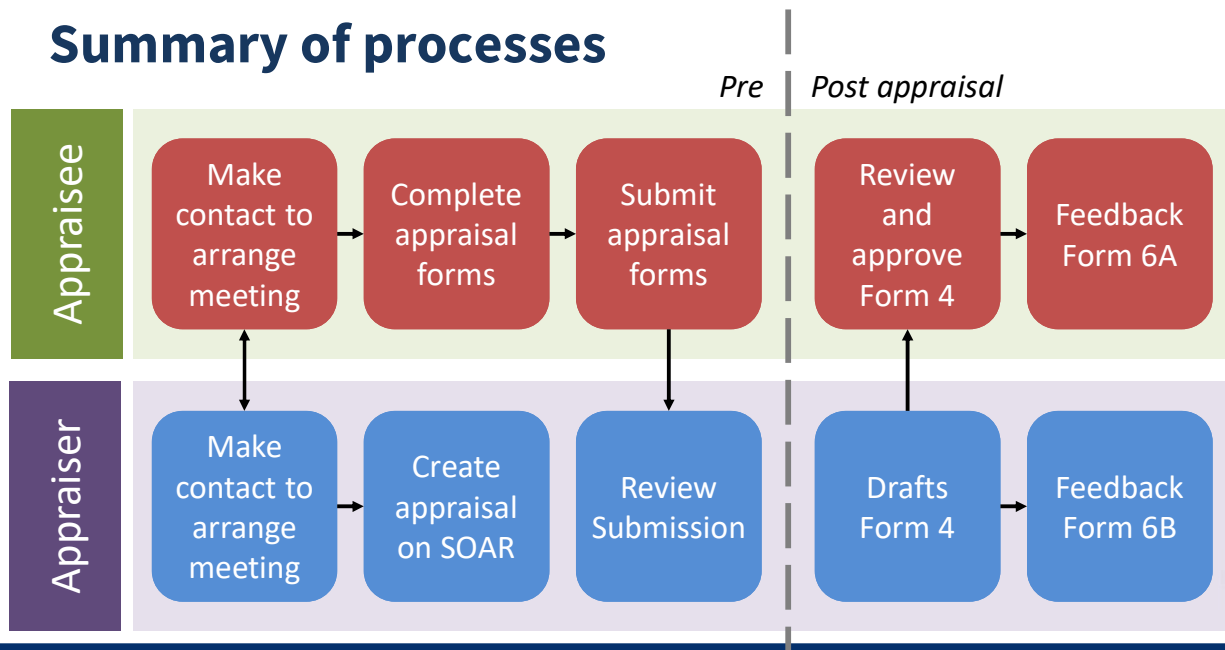
Multi-source Feedback is provided on SOAR by an external provider and is linked to SOAR's appraisal processes, but this is optional. If your appraisee wishes to use a different MSF service, they just need to ensure it's acceptable for revalidation purposes.

Recognised Trainers who are on Turas are imported into SOAR via overnight automated processes. Those with recognised GMC Trainer roles are asked to complete an additional ROT form as part of their annual appraisal under Form 3 Domain 1. Appraisers are asked to summarise the discussion in a separate section on Form 4.

If the Appraisee is a Clinical Academic with an honorary role with the NHS, they are marked as such on SOAR by the health board admin teams and are subsequently required to complete an "Academic Medicine" form as part of their appraisal on SOAR. Usually, these appraisals also include an appraiser from the university, who will also be involved with the Form 4 review and sign off.

Once the appraisal is concluded, both the Appraiser and Appraisee are invited to provide feedback on the appraisal process – this is facilitated via Form 6.

Summary of processes



In summary:

It is usually the Appraiser and Appraisee who manages their own calendar to arrange the appraisal meeting. Once arranged, it is the Appraiser who creates the appraisal on SOAR.

The Appraisee will complete their appraisal forms, including the collating and uploading of required supporting information.

In order to share the documents and completed forms, the appraisee needs to submit them to the created appraisal for the appraiser to review and prepare for the meeting.

After the appraisal meeting, the Appraiser writes up the summary of the discussion in Form 4 - which is forwarded to the appraisee for their review and sign off.

After the appraisal is concluded, both appraiser and appraisee are asked to provide feedback on the process via Feedback Form 6.

Further reading



- Medical Appraisal Scotland website:
 - www.appraisal.nes.scot.nhs.uk
 - *step-by-step overview video of SOAR*
- GMC Good medical practice:
 - <https://www.gmc-uk.org/professional-standards/professional-standards-for-doctors/good-medical-practice>

Image 4299814 from pixabay.com

For more information, please visit the Medical Appraisal Scotland website, which includes a step-by-step overview video of SOAR

It would be useful to go over the GMC's good medical practice for your reference

Support

- Appraisal / Revalidation queries:
 - Local Administration Team
 - Local Appraisal Leads
- SOAR Helpdesk:
 - SOAR@nes.scot.nhs.uk



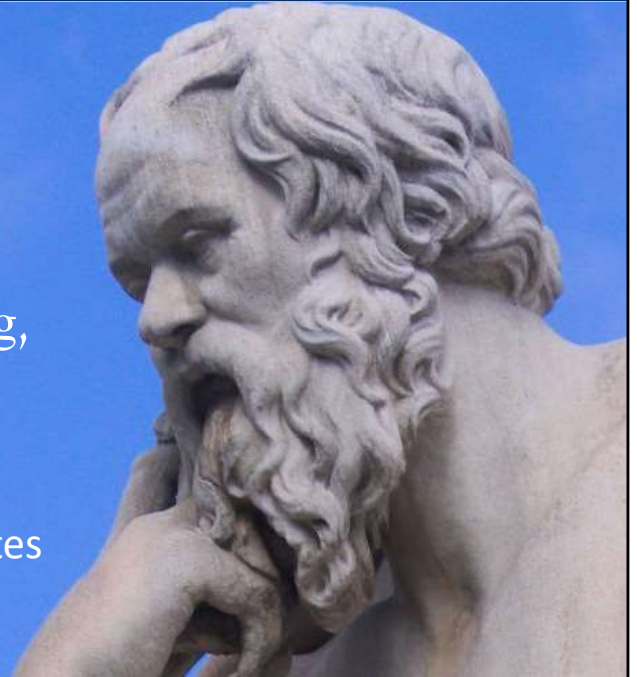
Image: Free for Canva users

If you have any appraisal or revalidation queries, please liaise with your health board's admin teams in the first instance. If appropriate they will escalate it to the appraisal Leads

For queries around SOAR, please contact the SOAR helpdesk.

I cannot teach anybody anything,
I can only make them think.

Socrates



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Before we finish this module, please remember, the role of the appraiser is not to educate or dictate the appraisee's actions. It's to encourage them to think and reflect on their achievements and support them in their continuous learning and development.

Thank you.



Interested in becoming an appraiser?

- Discuss with your Appraisal Lead
 - To check availability and suitability
 - www.appraisal.nes.scot.nhs.uk/contacts/appraisal-leads.aspx

If supported:

- Complete online modules
- Send in your application (cc Appraisal Lead)
- Allocation to place on training (via MS Teams)

Image: Free for Canva users

Thank you for completing this module. If you are interested in becoming an appraiser, please liaise with your Appraisal Lead in the first instance to see if there are vacancies first. We will prioritise training course places according to the health board areas that are in need of appraisers.

If proceeding, you need to complete the remaining modules. Once completed, and with support from the employing health board's Appraisal Lead, we will process your application form and proceed from there.

<https://www.appraisal.nes.scot.nhs.uk/appraiser-training/new-appraiser/>

This resource may be made available, in full or summary form, in alternative formats and community languages.
Please contact us on **0131 656 3200** or email **altformats@nes.scot.nhs.uk** to discuss how
we can best meet your requirements.



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[End of module 1]

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