

This partial Form 4 is based on this simulated appraisal discussion:

<https://www.appraisal.nes.scot.nhs.uk/appraiser-training/video-resources/discussing-private-work/>

This example, much like the simulated video, is not intended as the perfect Form 4 but rather to facilitate learner discussions at the Medical Appraisal Scotland training events.

## **FORM 4A - SUMMARY OF APPRAISAL DISCUSSION**

### ***Summary of Written Supporting Information Presented***

#### **DOMAIN 1: Knowledge, skills and development**

- *CPD Logs*
- *Quality Improvement Activity*

#### **Discussion:**

Dr Mimi is a **4-session a week GP partner in Verywell Health Centre**. She stated that Verywell was a central urban practice with a steady population of patients who tend to come from the more affluent strata of society, with a slightly more elderly population than average. The Practice covers a large nursing home, and Dr Mimi stated that she was not one of the two partners who took the lead in looking after this. Dr Mimi said that she provided all the usual general medical services and also had an interest in women's health. She stated that she was involved in family planning services and performed insertions and removals of contraceptive implants as well as giving Depo-provera injections. She stated that all the GP partners participated in the management side of the practice, but because she was one of the more senior GPs, she tended to be more involved in staff management issues, working alongside the Practice Manager.

Dr Mimi stated that she also does **one session a week regularly at a private screening clinic** in the Nuffield private hospital and that she had been doing this for three years and felt well established in it. She wrote in her forms that, 13 months ago, she was asked to take on a **voluntary role as the football team doctor** in her daughter's private school. She said that since that time she now did this regularly most weekends during term time. In her documentation, she also stated that she had been approached recently to help with some of the sports teams for the boys as well, and was thinking of volunteering to be one of the doctors on the parents and pupils fun run at the end of the summer term.

Dr Mimi stated that she felt she was needed as a football team doctor for the school as there was no one in this role before she took it on. She said there were frequent injuries usually of a minor nature eg sprains. She stated she was quite familiar with these relatively minor MSK injuries as a GP, and she would refer the players to their own GP for follow up if needed. We discussed some potentially more significant injuries such as head injuries, including from heading a football, and she said she was vaguely aware of some of the issues around this, but not that there were any specific guidelines for it.

Dr Mimi reflected being around lots of young people is a bit different from her everyday work and feels her daughter also appreciates the fact that she is supportive of sports at her school.

#### **CPD Logs:**

Dr Mimi had submitted a log of her learning activity over the past year for her appraisal. Her documented learning activities came to 54 hours/CPD credits in total.

Dr Mimi's learning log demonstrated that she had spent time on CPD activities relating to hypertension, female health, and care of the elderly. Her log showed that she used different methods of CPD across the year. She has undertaken a BLS, anaphylaxis and choking update during the year.

Quality Improvement Activity:

Dr Mimi stated that she had not personally led any QIA in the practice this year, but had contributed to discussions with other others, e.g. on frailty.

She stated that she also felt that she had contributed to improving quality outside of general practice by helping to make the school sports team a safer environment.

We also discussed the expected requirements for appraisal and revalidation for QIA.

**Actions/Agreed Outcomes:**

Dr Mimi to consider including the prevention and management of sporting head injuries, including any clinical guidelines for this. To update her PDP with this in mind, and to include this in her CPD log next year. To find out whether she needs a recognised pre-hospital sports trauma management certificate for this role. The Faculty of Sports and Exercise Medicine UK might be a useful starting point for this <https://www.fsem.ac.uk>

Dr Mimi to discuss the scope of her expected practice as volunteer football team doctor with her teaching colleagues at the school and ensure that she feels comfortable with this and has the appropriate knowledge and skills to deal with the range of injuries that issues that she might be expected to cover.

**DOMAIN 2: Patients, partnership and communication**

- *Was a formal PSQ submitted this year?*
- *Complaints / Critical Incidents Statement*

**Discussion:**

Patient feedback:

Dr Mimi had not submitted a formal PSQ this year. She stated that she had had some positive feedback from patients for her contraceptive services and had received a couple of thank you cards relating to this.

Complaints / Critical Incidents Statement:

Dr Mimi stated that she was not aware of any patient complaints against her over the past year.

We discussed how she might receive feedback from patients in her private work. She said that the private clinic ran patient satisfaction surveys once or twice a year, although they weren't focused on any doctor working there. She said that these were available for all the doctors to view if they wished, but she had not considered asking for them.

**Actions/Agreed Outcomes:**

To consider reviewing one or more patient satisfaction surveys from the private clinic and reflecting if there were any points to consider or take forward.

### DOMAIN 3: Colleagues, culture and safety

- *Review of Significant Events*
- *Was a formal MSF submitted this year?*
- *Health Statement*

#### Discussion:

##### Review of Significant events:

Dr Mimi had uploaded a palliative care SEA to her appraisal documentation. She stated that they all discussed this SEA in the practice. She reflected that it was very sad that there had been some communication problems within the team, and felt it was regrettable that there were no hospice beds available when needed. She concluded that there was not much more that could be done, and in the end the patient had a reasonable death.

##### MSF:

Dr Mimi had not submitted a formal MSF this year. She stated that she had had some positive and encouraging verbal comments about her contributions to the school sporting team, and that she felt that the staff there were very keen for her to continue this role.

Dr Mimi said she attended weekly practice education and business meetings with her GP colleagues. She stated that they also had meetings with other team members such as the health visitors and district nurses meeting on a Wednesday morning and had three-monthly meetings for significant events and complaints reviews.

##### Health Statement:

Dr Mimi said she had no health issues that impacted on patients and felt that her levels of fitness had improved since she had become involved in the school sports.

We discussed when she might do her MSF and who she might include as her raters.

#### Actions/Agreed Outcomes:

Dr Mimi to consider writing some reflections about her working in the private sector and as a volunteer. Using one of the SOAR templates available on TURAS might be helpful here.

### DOMAIN 4: Trust and professionalism

- *Probity Statement*

#### Discussion:

Dr Mimi said she had no probity issues to bring to the appraisal. We discussed the need for appropriate defence union cover for sports medicine activities.

We discussed possible conflicts of interest involving her private work and the need to avoid recommending her specific private clinic to her NHS patients. She stated that she was aware of this and took care to avoid this possible Col. We also discussed the risks of private work encroaching on her NHS GP time and several issues relating to this possibility. She said she had not discussed this explicitly with her partners.

#### Actions/Agreed Outcomes:

Dr Mimi to discuss her roles outside her NHS practice with her defence union and ensure she is adequately covered.

Dr Mimi to check her partnership agreement regarding engagement with private and voluntary work and to have an open discussion within the partnership about any of these activities that she and others were currently involved in or planning to be in the future.

### Personal development plan (PDP)

*PDP: review of agreed items from last year's Form 4*

PDP: Review		
Title	Timescale:	PDP Status
Management of antepartum bleeding	1 year	Completed
Hypertension management, including in pregnancy	1 year	Completed
Skin problems in pregnancy	1 year	Completed
Understanding wellbeing and mindfulness	1 year	Completed
<p>Dr Mimi has clearly invested a lot of time into making sure that her area of special clinical interest in the practice was kept up to date. She stated that she had found it useful to review resources for well-being and mindfulness and felt that these would be helpful to share with patients, staff and possibly also for her own use.</p>		
PDP: Year ahead		
Title	Timescale:	
Gestational diabetes	1 year	
Update in injectable contraceptives	1 year	
Review of guidelines for asthma and COPD	1 year	
<p>We discussed her PDP for the year ahead. On reviewing this, Dr Mimi recognised that she had not included anything in this relating to her roles outside of the practice and agreed it would be useful to revise the PDP to specifically include something in sports and exercise medicine relevant to her volunteer role.</p>		