

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 AA is now in her third year working as a six session salaried GP. She expressed that she feels well settled within the practice team and that her current work life balance is good. She enjoys her salaried role having previously been a GP partner.

In particular this year she has enjoyed using her mentoring skills to support the practice nurse in her training ANP role. This has been a mutually beneficial experience, and has led to many varied CPD activities relevant to ANP learning and patients seen together.

Dr AA submitted a comprehensive CPD log and completed all her PDP targets for the year. She has undertaken additional mentoring courses, learning around chronic pain guidelines and management, completed her DFFP and has been recertified to provide coil insertions, as well as "thinking heart failure", picking up new cases and following updated guidance in the management of these patients.

She reports using a variety of learning methods, from reading guidelines, to listening to podcasts, using webinars and attending local meetings.

Dr AA clearly enjoys her learning opportunities and is proactive in seeking new areas for learning. She has updated her knowledge and skills in a number of areas very relevant to her practice.

A number of Quality Improvement projects were discussed. These included joint working with the practice pharmacist on chronic pain reviews to reduce the prescribing of opiates and gabapentin/pregabalin. This is ongoing and has been very successful.

Dr AA audits how many patients coded with gestational diabetes have had annual HBA1C's. This year's audit showed an improvement in these figures.

Along with the ANP Dr AA reflected upon the number of new cases of heart failure patients diagnosed and their updated improved management.

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Actions/Agreed Outcomes:

Dr AA plans to carry out her patient satisfaction questionnaires in the next year. She feels that she is now well embedded in the practice team such that now would be a good time to undertake the survey. The use of the CARE Questionnaire was discussed.

She is also planning to update herself regarding emergencies in primary care being aware that the surgery is geographically distant from an A&E and ambulance waiting times can mean that doctors in the surgery are left managing acutely unwell patients.

"How to spot a sick child" is an area which she also plans to revisit and update her knowledge on to assist in her ANP mentoring role. These topics were in part prompted by the presentation of an acutely asthmatic child to Dr AA who had an unresponsive episode lasting 10 mins. The case was discussed and the success of primary care management reflected upon.

DOMAIN 2: Patients, partnership and communication

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

Discussion:

Dr AA plans to undertake her PSQ this coming year.

She has had no formal complaints and there were no critical incidents to discuss.

Actions/Agreed Outcomes:**DOMAIN 3: Colleagues, culture and safety**

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

Discussion:

Dr AA has done an MSF this year and the results were discussed. The ratings were very high across all categories (communication, respect for colleagues, manner, teamwork, knowledge and care, support, insight) and Dr AA had an overall rating of 6/6.

There were numerous extremely positive peer comments, including:- 'very personable, approachable and knowledgeable Dr', 'always willing to listen', 'pleasure to work with', 'effective communicator and listener', 'respectful to all members of staff', 'always makes me feel my opinion is valued', 'excellent team player', 'pleasure to work with', 'always open and easy to

approach', 'is a good leader who does so by example', 'enthusiastic', 'always includes all staff in team meetings', 'keeps knowledge up-to-date', 'very efficient in handling a demanding workload', 'gives staff confidence', 'always available', 'always supportive', 'is always caring and compassionate towards colleagues and patients alike', 'a very efficient, dedicated, and compassionate GP', 'both professional and friendly to all', 'works hard to care for his patients in a holistic manner'. These are worthy of mention.

While wanting to be dismissive, Dr AA was encouraged to reflect on these comments voicing just how much he, as a person and doctor, and his work and care were being recognized and appreciated by his colleagues. I congratulated him on his performance.

He also presented a SEA regarding an incident when he visited an unexpectedly unwell patient without oxygen or a defib. The SEA documents how Dr AA has reflected on the incident and how he will ensure that he brings equipment with him on future visits to ensure against a repeat of this incident. The SEA has been appropriately discussed with the practice team to encourage shared learning and behaviour change.

Dr AA has had no health issues this year.

Actions/Agreed Outcomes:

Reflect on the positivity of the MSF results.

DOMAIN 4: Trust and professionalism

- *Probity Statement*

Discussion:

No issues

Actions/Agreed Outcomes:

FORM 4C – PERSONAL DEVELOPMENT PLAN

Reviewing Last Year's PDP

From last year's agreed Learning Needs, which planned activities have been achieved?

Title	Timescale	PDP status
Pain management guidelines	-	Completed
Mentoring and Teaching update	12 months	Completed
New medications and guidelines in heart failure patients	12 months	Completed

Draft Learning Needs for the Year Ahead

Title	Timescale
Emergencies in primary care	6 months
Spot a sick child and paediatric conditions	12 months
Patient Questionnaires	By next appraisal