

# All England Appraisal Network

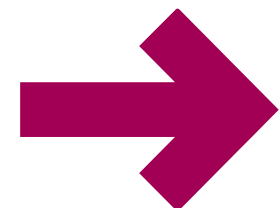
Dr Carl Egdell  
Appraisal lead Derbyshire and Derby City

18/5/26 and 9/6/16



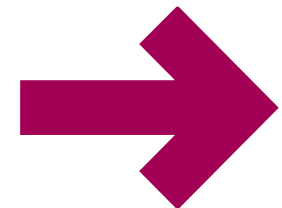
# Welcome to the appraisal network

- Aim to give overview of the RCGP guidance March 2016
- Highlight the main differences
- Contextualise the back ground to changes
- Time later in conference to discuss and ask questions



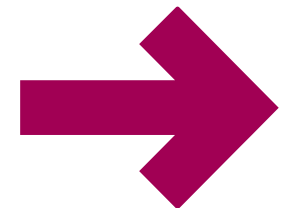
# Guidance vs requirements

- GMC set out the guidance for all doctors in UK
- The guidance is generic to all doctors
- AoRMC published additional guidance
- RCGP published speciality specific guidance for GPs
- RO to decide what is expected locally



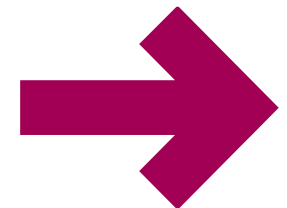
# What's new?

- CPD
  1. No impact
  2. Time spent on QIA can be claimed
  3. Quality not quantity
  4. Not to document everything
  5. Certificates not required



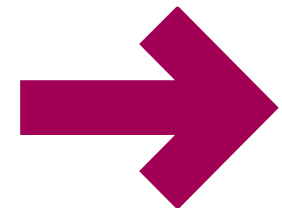
# Patient feedback

- Still a formal feedback survey every 5 years
- Required to reflect on feedback every year
- Could come from a variety of sources
- E.g. practice survey, patient compliments, nhs choices etc.



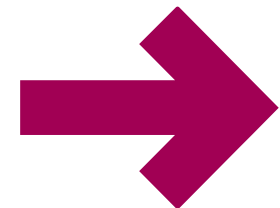
# Significant events

- Not to confuse the GMC version
- Most GP's will have no "SUIs"
- Removal of recommendation of 2 per year
- Case reviews and Significant events are in the learning context QIA



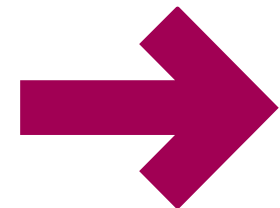
# QIA

- Most controversial?
- Removal of one audit per 5 years
- Removal of 2 significant events per year
- “Guidance”
- “Determine what is appropriate with your appraiser and prior agreement with your RO”
- Done annually



# Annual QIA

- Must Cover whole scope of work over the 5 years
- Must include an element of review
- Can include significant events, PDSA, review of national audits, audit, reflective case reviews
- Must include personal reflection of what the activity means to the doctor
- Demonstrate how you review and improve your patient care.





**Summary**  
**-more simple**  
**for gp's**  
**-more flexible**



**Thanks for  
listening**

