



# Medical appraisal 2022 outputs (incorporating Good Medical Practice 2024) template

## Supporting professional appraisal providers

### Covering Statement

The format of medical appraisal is set out in [Medical Appraisal Guide 2022](#), published by the Academy, with a [Medical appraisal template \[2022\]](#) intended to act as an illustrative template for appraisal toolkit providers. With the publication of [Good Medical Practice 2024](#), an updated appraisal summary template is required for providers to structure their appraisal outputs.

Doctors in all four countries of the UK now have access to technology supporting the use of an electronic appraisal platform. All providers are asked to develop their products using this template. **This template is not expected to function as a standalone appraisal outputs form.** A functional appraisal platform will not only provide the structured template for completing the appraisal summary, but also carries through key demographic and historic information from the inputs section to the outputs section, and also provide sign-off statements and a new agreed Personal Development Plan. Electronic platforms also provide the facility to lock down, save and share the final mutually signed-off version of the output documents.

Many doctors find embedded 'help' information and guidance notes and links to resources useful. We encourage toolkit providers to continue to offer these as indicated here, provided they are optional and do not add to the administrative burden on doctors.

This template represents the minimum information that the responsible officer must receive after sign-off of the appraisal by the doctor and appraiser.

1. Personal and appraisal details
2. Whole scope of work
3. Agreed personal development plan

The information in Sections 1-3 should correspond to the relevant sections in the [Medical appraisal template 2022](#) and is not replicated here.

## 4. Summary of the appraisal discussion

Overall summary [? <sup>i</sup>]

**[Required]**

Summary description of supporting information [? <sup>ii</sup>]

**[Required]**

Domain 1 Knowledge, skills and development [? <sup>iii</sup>]

**[Required]**

Domain 2 Patients, partnership and communication [? <sup>iv</sup>]

**[Required]**

Domain 3 Colleagues, culture and safety [? <sup>v</sup>]

**[Required]**

Domain 4 Trust and professionalism [? <sup>vi</sup>]

**[Required]**

## 5. Appraiser's statements

The Appraiser's statements, any associated commentary and confirmation of acceptance of the duties of a doctor by appraiser and doctor are set out in the [Medical Appraisal Guide 2022](#) and are not replicated here.

## 6. Doctor and appraiser sign-offs

The sign-off must contain the full names and GMC numbers of the doctor and the appraiser and the date of the appraisal meeting.

## Appendix: Text for information sections

Toolkit providers are advised to include the text in these sections behind suitably placed information buttons as indicated by the (?) symbols in section 4. The suggestions for potential supporting information relevant to each domain are expressed generically; doctors may look to their relevant college or specialty Body for guidance more specific to their area of practice.

?<sup>i</sup>

### Overall Summary

This should include:

- A 'pen picture' of the doctor's current work situation, the role[s] in their scope of practice and any review they have had in any substantive roles beyond their main job. Recent or planned changes in the doctor's scope of work should be noted.
- An indication of where the doctor is in the revalidation cycle, and their revalidation readiness if appropriate, with an action plan to address any missing supporting information if needed.

?<sup>ii</sup>

### Summary of supporting information

The appraiser should provide a short descriptive summary of the supporting information submitted by the doctor. This should not be a definitive list, but should provide either in this section or under each domain, an assessment as to whether the SI has covered the doctor's full scope of work and comment on the quality of the SI, including Quality Improvement Activity, with particular reference to reflective practice.

?<sup>iii</sup>

### Core Standards for Domain 1

1. Provide a good standard of practice and care, and work within your competence.
2. Keep your knowledge and skills up to date.

### Expanded areas to consider from the core standards and attributes of Domain 1

- Be competent in all areas of your practice and keep up to date.
- Provide good clinical care in assessment, investigation, diagnosis and treatment [including referral if needed].

- Provide safe and effective care face to face or remotely; refer to another mode of care if remote does not appear to be appropriate.
- Consider research opportunities as a clinician and signpost your patients if/when appropriate to do so
- Maintain, develop and improve your performance through CPD, review of your PDP, QIA, any significant event analyses and complaints, accompanied by discussion and reflection.
- Use resources effectively and sustainably, considering the environmental impact of healthcare.

**Potential supporting information relevant to Domain 1**

CPD. PDP review. Research information. Quality improvement activity. Significant event analyses/complaints if relevant.

? iv

**Core Standards for Domain 2**

1. Respect every patient's dignity and treat them as an individual.
2. Listen to patients and work in partnership with them, supporting them to make informed decisions about their care.
3. Protect patients' personal information from improper disclosure.

**Expanded areas to consider from the core standards and attributes of Domain 2**

- Treat patients fairly and respect their rights
- Treat patients with kindness, courtesy and respect
- Support patients to make decisions about their treatment and care
- Share information with patients and those close to the patient [as appropriate]
- Care for the whole patient
- Consider safe-guarding risks for adults and children
- Offer help in emergencies in line with your competencies
- Ensure patients who may pose a safety risk to others are not denied care
- Be open if things go wrong.

**Potential supporting information relevant to Domain 2**

Patient feedback. Examples of shared decision making. Safeguarding. Basic life support.

Records and information governance. Complaints and significant event analyses.

? v

### Core Standards for Domain 3

1. Work with colleagues in ways that best serve the interests of patients, being willing to lead or follow as circumstances require.
2. Be willing to share your knowledge, skills and experience with colleagues, whether informally or through teaching, training, mentoring or coaching.
3. Treat people with respect and help to create a working and training environment that is compassionate, supportive and fair.
4. Act promptly if you think that patient safety or dignity may be seriously compromised.
5. Take care of your own health and wellbeing needs, recognising and taking appropriate action if you may not be fit to work.

### Expanded areas to consider from the core standards and attributes of Domain 3

- Treat colleagues with kindness, courtesy and respect; report bullying or discrimination
- Contribute to a positive working and training environment
- Demonstrate leadership behaviours [as appropriate]
- Delegate safely and appropriately
- Record your work clearly, accurately and legibly
- Keep patients safe
- Respond to safety risks
- Manage risks posed by your health
- Health statement.
- Measure quality and outcomes

### Potential supporting information relevant to Domain 3

Multi-source and other colleague feedback. Team meetings. Teaching and training activities. Record keeping. Health and well-being scores. Review of safety issues including complaints and significant event analyses. Doctors who have been involved with a case[s] referred under the Patient Safety and Incident Reporting Framework(PSIRF) should include a summary of outcomes and learning points from any PSIRF with their appraisal documentation.

? vi

### Core Standards for Domain 4.

1. Act with honesty and integrity and be open if things go wrong.
2. Protect and promote the health of patients and the public.
3. Never unfairly discriminate against patients or colleagues.
4. Never abuse the trust patients place in you or the public's trust in your profession.

**Expanded areas to consider from the core standards and attributes of Domain 4**

- Act with honesty and integrity in your professional work and in any research you undertake
- Maintain professional boundaries
- Be honest and trustworthy in all written, verbal and digital communications
- Follow relevant GMC guidance on advertising services, use of social media, giving witness statements
- Manage conflict of interests honestly and appropriately
- Cooperate fully with legal and regulatory requirements.

**Potential supporting information relevant to Domain 4**

Probity statement. Research probity statement. Medical defence cover. Any information asked to bring. Engagement in appraisal process. Social media issues.