

## **Professional Standards: Suspension of appraisal and revalidation during Covid-19 pandemic: frequently asked questions**

(drafted with RCGP)

### **Key message:**

Appraisal, revalidation and associated activities (compiling your portfolio, recording CPD and quality improvement, formal feedback) are suspended until further notice. This is to allow doctors, appraisers and the associated administrative teams to focus on clinical work and use their skills in the best way to support the Coronavirus emergency.

No doctor's licence to practise will be affected by this.

If clear about this, you do not need to read further. If you have further questions, these FAQs may help.

### **1. What has the GMC done about revalidation recommendations?**

On 17 March 2020, the GMC announced that all revalidation recommendations due before the end of September 2020, would be deferred for a year. This gives affected doctors across the UK a renewed licence to practise for a further year, and takes the pressure off doctors and the Responsible Officers and governance teams responsible for making their recommendations to the GMC. This is a proportionate response to free up clinical time in light of the Covid 19 pandemic and will have no repercussions for doctors.

### **2. My revalidation recommendation was due before the end of September 2020 and it has been deferred by the GMC; what does that mean?**

By deferring your revalidation recommendation due date for a year, the GMC have issued you with a UK Licence to practise for a further year, and you can carry on practising as before. If not already completed, you have an extra year in which to complete all the requirements for your revalidation recommendation, so that you do not need to worry about them during the Covid 19 pandemic.

### **3. My revalidation recommendation was due before the end of September 2020 and I have just heard that I have been revalidated; what does that mean?**

If your medical appraisals to date, and the governance information checks, revealed that you were ready to revalidate before now, you may have already



had a positive revalidation recommendation made. If this was before the cut-off point, where the GMC made a block deferral recommendation, you will have been issued with a renewed UK Licence to practise valid for a further five years. You have started your next revalidation cycle in the usual way.

**4. I am due to be revalidated before the end of September 2020 and have not yet had my revalidation-ready appraisal. Do I need to do anything?**

You do not need to contact the appraisal office. The GMC has already announced that all revalidation recommendations due before the end of September will be deferred for 12 months. Deferral is a neutral act, which renews your GMC Licence to practise for that time, giving time for the Covid 19 pandemic to pass and you to have your next appraisal in a year's time, before your revalidation recommendation is due again.

**5. What has happened to annual medical appraisals?**

Every designated body and Responsible Officer has the authority to respond to the Covid 19 pandemic in an appropriate way for their organisation and context. On 20 March 2020, NHS England/Improvement announced a suspension of all annual appraisals for GPs working in the NHS for the foreseeable future. Scotland, Wales and Northern Ireland are expected to follow suit.

Doctors who were due to have their annual appraisal in the forthcoming months will be issued with an 'approved missed' appraisal and their appraisal will be carried forward twelve months. This is a pragmatic decision to free-up clinicians at this time and to avoid creating a year-end bunching problem by postponing the appraisal instead of cancelling it. There will be no repercussions for doctors who have an 'approved missed' appraisal in this way.

Some smaller designated bodies may choose to postpone their appraisals (rather than giving doctors due to be appraised in the near future an 'approved missed' appraisal). Postponement is appropriate if it would be possible to facilitate appraisals for all doctors later in the appraisal year without putting undue pressure on the medical workforce. You should be notified of the situation in your designated body by your Responsible Officer.

**6. For how long have appraisals been suspended?**

For most designated bodies, appraisals have been suspended for the foreseeable future. It seems likely that this suspension will remain in place at least until the end of September 2020, in line with the GMC revalidation recommendation deferrals. Further information will be available in due course.

**7. My appraisal has been suspended; what should I do?**

You do not need to contact the appraisal office or complete any documentation. The appraisal administration team will process an 'approved missed' appraisal for you and you will miss a whole appraisal year. This will be acceptable to the GMC and will show on your records as being due to the national emergency caused by the Covid 19 pandemic.

**8. When will my next appraisal be due?**

The appraisal year runs from 1 April to 31 March every year.

If you miss your 2019-20 appraisal, due at the end of March 2020, with an 'approved missed' appraisal, your next appraisal will probably fall due in twelve months' time i.e. at the end of the 2020-21 appraisal year. If you have an 'approved missed' appraisal in 2020-21, i.e. after 31<sup>st</sup> March 2020, because of the national emergency and Covid 19 pandemic, your next appraisal will probably fall in your usual month in the 2021-22 appraisal year.

It is likely that your appraisal month will stay the same, to avoid any increase in year-end bunching, but it is not yet entirely clear how long we will be in a state of emergency or these measures will need to be in place, so please be patient. Further information will be available in due course.

When systems are back to normal, you will be notified once your appraisal is due. In the meantime, if you receive any automated reminders or notifications in error, please be patient while the administrative processes catch up with this unprecedented situation.

**9. I had an 'approved missed' appraisal last year, won't I need an appraisal this year?**

No. If the timing is such that you had an 'approved missed' appraisal in 2019-20, for example due to Maternity Leave or sickness, and you have been given an automatic 'approved missed' appraisal for 2020-21, don't worry. This is a national emergency and there will be no repercussions for you. Your next appraisal will cover the whole period since your previous one, even if that is more than two years.

**10. I was due to have my appraiser for the last time for continuity this year; if I have an 'approved missed' appraisal will I be able to complete my appraisals with them next year?**

Yes. Having an 'approved missed' appraisal does not affect the count for the number of consecutive appraisals with the same appraiser. You will be able to complete your series of appraisals with them for continuity, providing they are still appraising and have the capacity.

### **11. Do I need to contact my appraisal toolkit provider?**

It would be reasonable to communicate directly with your appraisal toolkit provider once you have had confirmation that you will have an 'approved missed' appraisal. They will be able to close off your current year's appraisal portfolio and move any entries made already into the next appraisal year for you.

You do not need to contact your appraisal toolkit provider if you do not have time. We anticipate that the appraisal toolkit providers will take appropriate action in due course, although it may take a little longer than if you contact them directly.

### **12. What happens to the supporting information I have gathered so far if my appraisal is missed?**

At your next appraisal, you will be able to present any information gathered since your previous appraisal even though the time between appraisals is longer than usual. This includes supporting information entered into your portfolio prior to the Covid 19 pandemic.

There is well understood guidance about what to do if there is a significant gap in your appraisals due to maternity leave or other long term absence from work. You should keep your supporting information proportionate to your time in work and present what is applicable to your whole scope of work between the two appraisals.

### **13. How much CPD will be expected at my next appraisal?**

The usual RCGP guidelines for the threshold quantity of CPD you should demonstrate to cover your whole scope of GP work at any appraisal is 50 credits per year pro rata (based on the length of time between appraisals). Please note that this amount is guidance (not mandated) and your Responsible Officer and your appraiser will not expect you to be gathering evidence for appraisal during the Covid 19 pandemic. The amount of learning and quality improvement activity, in terms of service redesign, we have all done over the past weeks during this national emergency is already well in excess of 50 credits. Your appraiser will fully understand that.

### **14. When appraisals are resumed, will time spent learning about COVID-19 count towards CPD and QIA?**

Of course! Continuing Professional Development is about lifelong learning and anything that you learn about which allows you to demonstrate your reflective practice, including Covid 19, will count. The system redesign needed to work out how to alter how you work to be effective in a pandemic is a good example of a quality improvement activity to reflect on.

**15. What if my revalidation recommendation is due this year and I haven't done my MSF, patient feedback etc?**

If you have not yet collected patient and colleague feedback, the RCGP recommendation is that it is now inappropriate to do so. It would be a distraction from urgent clinical care to be doing feedback exercises that are not seamlessly embedded in business-as-usual. The current survey based feedback is a non-urgent non-clinical task that should be deferred to a better time.

Revalidation recommendation due dates up to the end of September 2020 have already been deferred for a year, so there will be time once the Covid 19 pandemic has passed to look at collecting and reflecting on feedback.

Even if your revalidation recommendation due date is after the end of September 2020 and has not yet been deferred, don't worry about your revalidation recommendation. There is a pathway for the GMC to make the decision to defer your recommendation date to give more time for you to collect supporting information. During that time your UK Licence to practise will be extended to the new revalidation recommendation date, so you will not be disadvantaged.

**16. What if I want to have my appraisal because of the value of the discussion to me?**

It is inappropriate to spend time preparing for, or having, an annual medical appraisal for revalidation at this time of national emergency. You, and your appraiser, will need to spend your time on your clinical work, or resting and recharging to maintain your health and wellbeing. A once a year intervention is not the right form of support at this time.

The RCGP, and many other bodies, are seeking ways to make coaching and mentoring, listening, buddying and other support available to all GPs now when you need support, not just in the month when your appraisal might be due.

**17. It says there is provision for a medical appraisal for revalidation to go ahead in 'exceptional circumstances'. Does this apply to me?**

If you currently have sanctions on your practice and they stipulate that you have to have an appraisal for some reason, then arrangements can be made for this to go ahead. It may not be with your previous appraiser, as they may be a front-line clinician with no capacity to do appraisals at this time. If this is the case, an alternative appraiser will be found so that your appraisal can take place as required. It would be appropriate for you to contact the appraisal office in good time if you know that you are in this situation so that arrangements can be made.

**18. If I have to have an appraisal due to ‘exceptional circumstances’, should I have my appraisal face to face or remotely using video conferencing technology of some sort?**

During the Covid 19 pandemic, the RCGP strongly recommends that GPs do not meet face to face for an appraisal to minimise the risk of transmitting the virus between practices / locations. It seems far more appropriate to have the appraisal meeting using remote telecommunication assistance. This will require the completion of the appropriate documentation to allow the RO to monitor which appraisals have been affected and the appraiser will need to include the information that the appraisal was facilitated remotely in their summary.

Top tips for appraisals done remotely:

- Test the IT before you start. Is the internet access fast enough to do a video-call? Can you see and hear each other clearly?
- Take regular breaks to avoid looking at the screen and at each other for too long. Ideally stop for long enough to make a cup of tea every hour or so.
- Remember the camera is not where the image is so the eye contact is often slightly odd. It may be necessary to clarify more non-verbal cues explicitly than in a face to face meeting

**19. Why is it appropriate to suspend appraisal and revalidation now?**

Revalidation is the recognition that you have demonstrated your continued competence at what you do (across your scope of work) by presenting, reflecting on and discussing at annual appraisal the supporting information about how you keep up to date, review and get feedback on what you do, and that your designated body has no outstanding concerns about your practice arising from any of the normal governance routes (complaints and significant events etc.).

In a time of national emergency relating to the Covid 19 pandemic, it is reasonable to suspend the work that goes into the demonstration of continued competence. Maintaining professional standards is still vitally important, but it is safe to assume that doctors who are normally able to demonstrate that they keep up to date and fit to practise will continue to do so. Reducing the burden of non-urgent non-clinical work frees up clinical time and time to rest and recharge.

If there are any FAQs you think we've missed, or you would like clarification, please contact [revalidation@rcgp.org.uk](mailto:revalidation@rcgp.org.uk)