

GP Feedback on their appraisal via RMS –data analysis for NHSE Cumbria and North East

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Report compiled by: Dr Di Jelley Clinical Appraisal Lead NHSE Cumbria and NE

Summary

Available RMS appraisee summary Feedback forms for all almost our appraisers for 18/19 were downloaded at the end of January 2019 –covering the period of appraisals from April to December 2018. Since there is no facility within RMS to run a report summarizing the content of feedback forms, a manual transfer of data was made from the feedback forms of 166 appraisers who had carried out 2137 appraisals. GPs had provided feedback via RMS on just over half of these appraisals, giving numerical and free text responses on 1117 [52%] of the total number appraisals carried out over this period. The numerical data from the feedback forms was transferred manually to an EXCEL spread sheet, and the free text comments were collated on a Word document.

Overall, most of the responses were extremely positive, as seen in the tabulated data and qualitative analysis presented below. The vast majority of appraisers were highly rated across all criteria, with a large number of grateful and appreciative free text comments. There was a much small number of negative or critical comments, and these are detailed below and also addressed in the recommendations found at the end of this report.

There are some limitations to the data analysis presented here.

- Only just over half of the GPs in this sample provided written feedback on their appraisal. It is difficult to know the effect of this non-responder bias on the data - are GPs who are satisfied with the appraisal process more likely to respond to the survey request than their dis-satisfied colleagues? This may be clearer if, in due course, we are able to compare NE results with other areas where response rates may be higher.
- Another issue is that the way in which the free text comments are collated on RMS does not enable us to know whether an appraiser with five comments has feedback from up to five GPs, or from one or two GPs who have made multiple comments. The number of recorded comments at 670+ is therefore an estimate rather than an absolutely accurate figure.
- In addition, there will inevitably have been some transcription errors in the transfer of 1000s of units of data from the RMS sheets to EXCEL.

Notwithstanding these limitations, the data presented below provides a very positive picture of the value of appraisal to the individual GPs who did respond to the feedback request, and it also highlights a number of areas where the process could be improved.

Data analysis Section 1: Detailed breakdown of the numerical data

The detailed numbers from the EXCEL analysis are tabulated below. In terms of the process, nearly two thirds of appraisals took between one and two hours, and a third took between 2 and 3 hours –the reasons why 50 appraisals took more than 3 hours, or why 30 appraisals took less than an hour, could usefully be explored, although 99% of GPs felt that the time taken was appropriate to the task.

In terms of overall satisfaction, GPs were asked to rate their appraiser in relation to eleven different criteria, on a rating scale of poor [1] to very good [5]. Appraisers were rated as good or very good by the vast majority of GPs. The lowest score [94% of appraisers] was for the GP to assess whether the appraiser was sufficiently challenging –achieving the right balance between support and challenge is acknowledged to be one of the most difficult appraiser skills, and it is very commendable to see this criteria rated so highly by most GPs. In this sample. When asked if they would be happy to have the same appraiser again, 98% were in agreement with this statement, and only a total of 17 GPs out of 1117 [1.5%], would wish to change their appraiser before the end of the three year cycle

The remaining questions related to the appraisal process and the usefulness and impact of appraisal in five specific areas. At least 85% of respondents felt the appraisal process improved patient care and 89% of GPs felt that it led to the promotion of quality improvement activity. More than 90% felt that appraisal helped their personal and professional development, as well as preparing them for revalidation.

Table 1.1 Overall Summary of the data responses

Sample of appraisers:	166
Total number of appraisals in sample:	2137
Total number of appraisals where appraisee feed-back has been received:	1117
Feedback response rate (average):	52%

Table 1.2: About the appraisal

	Hours	Total	%
How long did the appraisal meeting take?	<1	30	2.7%
	1-2	664	59%
	2-3	378	34%
	3-4	49	3,3%
	4-5	1	

About the appraisal	Yes	%	No	%
Was the venue private and professional?	1103	99%	14	1%
Was the protected time sufficient?	1103	99%	14	1%
Would you be happy to have the same appraiser again?	1100	98.5%	17	1.5%

Table 1.3: Rate your appraiser in relation to the following criteria

1 = Poor 2 = Borderline 3 = Satisfactory 4 = Good 5 = Very good

Questions	1	2	3	%	4	%	5	%	4 and 5
Establishing rapport		1	28	2	173	15	915	82	97%
Demonstrating their preparation for your appraisal		3	26	2	155	15	860	83	98%
Listening to you and giving you time to talk		5	20	1	140	14	869	84	98%
Giving constructive, helpful feedback		5	28	3	160	15	850	81	96%
Supporting you		6	31	3	165	16	832	80	96%
Challenging you	1	3	52	5	318	31	662	63	94%
Helping you to review your practice		4	35	3	258	25	736	71	96%
Helping you to identify gaps and improve your portfolio of supporting information for revalidation	5	3	29	3	248	24	753	72	96%
Helping you to review your progress against your last personal development plan		2	27	3	201	20	804	77	97%
Helping you to produce a PDP that reflects your development needs		3	29	3	201	20	801	77	97%
Managing the appraisal process and paperwork	3	7	32	3	159	15	832	81	96%

Table 1.4 Did you find the appraisal useful for...

Question	Yes	%	No	%
Improving patient care?	889	86	145	14
Promoting quality improvements in your work?	917	89	119	11
Your personal development?	896	86	140	14
Your preparation for revalidation?	969	94	67	6
Your professional development?	931	90	106	10

Data analysis Section 2- Qualitative data analysis of all the free text comments

A detailed summary of the free text comments is contained below. More than 670 comments were recorded, most of these related to the appraiser, but some were directed towards the appraisal process, and some to both the appraiser and the process.

The comments were analysed initially into positive and negative groups. When viewed overall, around 85% of the comments were very positive, predominantly praising and thanking the appraiser, but quite a number also acknowledging the value of the appraisal process. Many fewer critical comments were recorded, and the large majority of these related to the process of appraisal rather than a critique of their appraiser's performance.

The comments were then analysed in more detail, using an iterative process of reading and re-reading until all major themes and sub-themes had been identified in each group. An analysis was also done of the frequency of use of specific adjectives, as quite a number of comments consisted of just 2 or 3 words, and these were linked into the themes. Examples from the free text comments were selected to illustrate each theme and sub-theme, and these are shown in Tables 2.1, 2.2 and 2.3 below.

Table 2.1 shows that the appraisal process was appreciated most frequently for being useful, for providing positive and constructive feedback and for aiding the process of reflection. Appraisers were praised for being helpful, supportive, professional in approach, thorough, constructive, knowledgeable, and well-prepared, and approachable. The word excellent is used more than 120 times by GPs describing the work of their appraiser. Several GPs highlighted the skill of their appraiser in achieving a good balance between challenge and support. Core themes which emerged, were the important role of their appraiser in providing a framework for discussion of future needs and plans and for providing space for reflection and review, especially after stressful times, including return to work after a period of sick leave. Some appraisers were thanked for helping GPs feel better about themselves and their work, through positive commentary, feedback and discussion. Not many GPs made a direct reference to appraisal improving patient care, but several mentioned that appraisal helped them improve their clinical knowledge and skills, making them better doctors. A significant number of GPs made comments lamenting the fact that that 18/19 was the final appraisal in the three-year allocation cycle and wishing that they could continue to be appraised by the same appraiser next year.

Tables 2.2 shows the main criticisms of the appraisal process. Quite a number of GPs commented on the poor functioning of the MAG form, the fact that it is a free standing document rather than a website and the frustration that it cannot be viewed on I pads or telephones. Quite a few GPs stated that the appraisal process was unnecessary, as they were already doing the regular learning and reflection required by appraisal, and resented being made to do more of this in a formal structure. Some GPs commented that appraisal had shifted from a formative process to a 'tick box' exercise of little value to them. Another

core concern was the time the appraisal process took in terms of preparation- for some this was seen as time that could be better spent in active learning or patient care. For others, the time involved in appraisal preparation simply increased the stress on an already over-stretched profession, and reduced free time for activities that might mitigate the effects of work stress. Other negative comments included a perception that poor doctors could easily 'pass' appraisal and revalidation, and that appraisal was not an effective tool for identifying poor performance. A handful of GPs stated that appraisal/revalidation were two reasons for taking early retirement and leading to poor morale amongst doctors. A couple of GPs commented that appraisal should, but did not, seek to highlight the serious stress levels amongst doctors prevalent across the NHS.

Table 2.3 lists the [very few] negative comments made directly by GPs about their appraiser. These included a few observations that the appraisal was rushed and lacked adequate time for reflection, and a couple of GPs indicated that the appraiser seemed ill-prepared and not very familiar with their documentation. In a few instances the GP commented that their appraiser lacked empathy, which had left them feeling 'dispirited' or 'deflated'. Poor listening skills was a comment made about one appraiser, and a few GPs were not happy that they had been asked to travel to have their appraisal. But overall, the percentage of appraisers who received any personal negative comment was less than 2%, and no appraiser had more than two negative comments.

Table 2.1: Positive comments about the appraiser and the appraisal process [sometimes difficult to separate]		
Broad category	Specific Themes	Examples of specific comments
Comments about the Appraisal process	Useful [54]	<p>I'll be very sad to have a different appraiser next year as I always found Dr T to be very supportive and constructive, making the appraisal process a useful tool for reviewing my work.</p> <p>My resentment for appraisal process has diminished greatly, I can honestly say I found this appraisal useful for my on-going medical career and has been, dare I say it, inspiring</p> <p>The Appraisal process does what it sets out to do, it makes us consider development where necessary and it focuses the GP on reflecting on the year they have had. It therefore ticks the boxes required for revalidation.</p>
	Aids reflection [41]	<p>It was a very pleasant experience .very thorough, constructive and given me advice regarding future preparations for appraisal and how to improve reflection on the reading / learning</p>

		<p>materials and what changes I could make</p> <p>it was nice to have some protected time to reflect and discuss</p> <p>Plenty of time to reflect, no interruptions, convenient time and place</p> <p>...the process of reflecting upon my work/goals/ambitions is invaluable</p> <p>I think the appraisal process, while rather a chore to complete, does actually cause reflection on what I've been doing and a general direction in which to head for the coming years. I have seen changes in my development as a result.</p>
	Feedback [32]	<p>Very welcoming. Helpful appraisal discussion, providing feedback and forward planning steps</p> <p>Gave very useful feedback and helped to guide PDP ideas for next year.</p> <p>Helpful, useful and sensible advice and feedback given</p>
<p>Appraiser characteristics and skills –mostly from analysis of use of positive adjectives – frequency of occurrence shown in brackets]</p>	Supportive [145]	<p>She is a very supportive helpful understanding approachable and makes you comfortable and always there for you.</p> <p>I have had Dr X as an appraiser for three years during which he has been thoroughly supportive and really made me think about my professional achievements and aspirations. ...I have really felt listened to and understood</p>
	Excellent [116]	<p>X is an excellent appraiser. My appraisal conversation was an enjoyable and extremely worthwhile learning and development opportunity.</p> <p>Excellent insightful appraiser with excellent communication skills</p> <p>EXCELLENT APPRAISER, VERY USEFUL AND ENJOYABLE PROCESS</p>
	Helpful [107]	<p>Dr X is very helpful in my appraisal as we were not dwelling to much on the form and paperwork instead having a wide ranging conversation. With her help this</p>

		<p>has enabled me to see with more clarity the challenges and opportunities in the coming year and make sense of some of the last year.</p> <p>X was excellent, great communication from the start. Very supportive, clearly and read my portfolio and given thought into what would be helpful for me. Great support after the appraisal also in terms of signposting to helpful learning tools and information. Very impressed.</p>
	Professional approach [60]	I was very impressed with the appraisal meeting. Although very professional , it also felt familiar, with the conversation flowing naturally. It did not feel like an assessment at all, but talking to an old friend. However, at the end of it there were many learning points, a better understanding of the appraisal process and a strong learning plan for next year
	Thorough [57]	Dr X was excellent Focused on the areas which are a priority for me. He is very helpful and thorough in his work.
	Well Prepared [54]	This is my second appraisal Dr X and I found it a very supportive and constructive session. She had clearly read all of my entries and prepared fully for the session with questions and suggestions
	Constructive [52]	<p>The Appraiser was excellent listened and gave constructive advice and feedback - it was really helpful as a discussion, and made me look at some issues in a different way - very good Appraiser.</p> <p>I'll be very sad to have a different appraiser next year as I always found Dr T to be very supportive and constructive, making the appraisal process a useful tool for reviewing my work.</p>

	Experienced [20]	Very happy with this appraiser: kindly and experienced . Helpful, useful and sensible advice and feedback given. Very knowledgeable appraiser who is also very experienced and able to easily discuss and add very useful insights into an extremely wide range of topics.
	Approachable [17]	Flexible, efficient, approachable and supportive, I would be happy to recommend this appraiser Really helpful and approachable appraiser. Thank you for your input
	Knowledgeable [16]	X was a very knowledgeable and supportive appraiser, particularly with this being my first appraisal. He demonstrated a very good understanding of the appraisal system and was able to explain it very clearly. We went through it in a clear, systematic manner and covered all the requirements thoroughly. He was able to answer all my questions helpfully and with ease
	Good balance of challenge and support [10]	The appraisal itself was supportive but challenging and allowed me to think about my future development and reflect upon my past years work Excellent. Perfect balance between challenge and support Excellent. I am going through a very challenging time at work- very good at reading between the lines, challenging and supporting whilst still remaining objective Focused on the areas which are a priority for me. He is very helpful and thorough in his work.
Support with career personal and professional development	Has helped reflection and supported the GP's personal and professional development	Had reviewed all my paperwork before the meeting allowing a relevant and very useful discussion. Excellent supportive and insightful appraiser. Really helped me to find out what I wanted to achieve and aim for in the coming year.

		<p>I do feel I have been enabled to use the appraisal to reflect on myself and my work and focus on the next year ahead. There is often not the opportunity to do this at other times in your professional job. Thank you to X for doing my appraisal. It is appreciated.</p>
		<p>He is always well prepared and was very good at making my PDP fit my changing practice. He also gave me useful links to help me in the coming year.</p>
		<p>He has managed the appraisal process in a very supportive way which has allowed me to reflect on areas of my practice which I wouldn't necessarily have thought about and allowed me to come up with PDPs that are much more relevant to me than I would have thought</p>
		<p>Helped me to think more about my future plans and how to continually develop as a well-rounded GP considering clinical and non-clinical areas.</p>
		<p>Gave me good time to talk and gave very useful feedback and advice. We spent good time reviewing my PDP and deciding on next year's PDP.</p>
		<p>I found Dr X to be a very supportive, interested and engaging appraiser who had clearly prepared well for our discussion. She challenged me appropriately and this has helped me to move forwards in terms of setting some short term goals</p>
		<p>This was the 3rd appraisal I had with X and I found him to be the best appraiser I have had, perhaps because there was more challenge involved and he made me think more about certain aspects of my work. I actually looked forward to my appraisal! Very insightful comments and he was very helpful. Made the PDP relevant so I could develop, and not just about going on courses etc. to further knowledge.</p>

Resilience work life balance	Helping the GP cope with challenging times at work or elsewhere	<p>Took lots of time and care to understand the complicated year I had had. Made me feel at ease and safe -sharing and discussing the complications and working through some things in my own mind. Couldn't have wished for a better appraiser. Thank you very much.</p>
		<p>Very knowledgeable appraiser who is also very experienced and able to easily discuss and add very useful insights into an extremely wide range of topics. Very helpful. Also, very good at understanding and helping with complicated life events. Couldn't have wished for a better appraisal in every way in a year when I was needing to conclude a complicated and difficult situation</p>
		<p>I felt very comfortable and felt Dr X had shown great sensitivity and empathy toward my particular and very difficult circumstances</p>
		<p>Excellent support throughout a very challenging period. Some subtle and thoughtful challenges for me to take away to mull over .Thank you .</p>
		<p>The appraiser was really good at focusing around my needs and establishing certain struggles that I have encountered in general practice. I felt empowered by the end of the process and this has enabled me to be more assertive in career decisions. She addressed all my needs - both professional and personal which I didn't expect but am grateful that my personal circumstances will have an impact on certain decisions I may make.</p>
	Return to work after sick leave	<p>X was simply outstanding. I had been through a very difficult period at just prior to our first appraisal resulting in a prolonged leave of medical leave. At that time, I was terrified of everything. The initial appraisal was hugely supportive, non-judgemental and well paced. It gave me hope and positivity when there was none. As my situation resolved/improved, the appraisals changed and became more</p>

		<p>progressive/ challenging. I cannot recommend X as an appraiser more highly enough!</p>
		<p>I have recently returned from a lengthy absence due to ill-health and Dr X was particularly understanding and helpful as I had not managed to complete all my targets. She displayed considerable empathy towards me as a colleague who had suffered from illness, which was very much appreciated</p>
	<p>Making me feel better and work more effectively</p>	<p>Always a positive experience with M, come away feeling revitalised about being a GP and ready to keep improving She was polite gentle and very professional GP and I wish every body was like her Appraisal was made very easy and smooth process by her</p> <p>I was feeling very weighed down by my current workload , but having the appraisal helped me feel a bit better about it all afterwards .</p> <p>A very supportive appraisal with constructive suggestions to develop as a GP and manage workload and work/life balance.</p>
<p>Quality improvement patient care</p>	<p>Patient care</p>	<p>Revalidation appraisal was last year but meeting was helpful for continuing professional development and improving quality and safety of patient care</p>
	<p>Personal GP skills</p>	<p>X was very astute and provided me with insight to how I can make changes to my consulting. I came out of the appraisal with a fresh hope that I can make changes which will make general practice more manageable for me.</p> <p>X has been my appraiser for the last three years and appraisals with X have never just been about "ticking all the boxes". She has shown me unstinting support and</p>

		been invaluable in guiding me through some challenging personal and professional issues. I now have much greater insight and feel I am a better doctor and a better person because of her support.
Appreciation of the Appraiser's skills	I wish I could keep the same appraiser next year..... [18/19 was the last year in the three year appraisal allocation cycle]	I'll be very sad to have a different appraiser next year as I always found Dr X to be very supportive and constructive making the appraisal process a useful tool for reviewing my work.
		Thank you. I'm just sorry that I can only have 3 appraisals with Dr X.
		Shame it is my 3rd appraisal, I have found the appraisal meetings over the past 3 years some of the most useful I have ever undertaken.
		Have been lucky to have Dr X for past 3 appraisals and will be a shame not to see her for this next year!
		Relaxed yet thorough. I wish I could have her again.
		Excellent appraiser, sad will have to move to another as have had 3 appraisals from her
		X is an excellent appraiser, the best I have ever had. The last 3 years have been enormously helpful, and such a shame that I can't continue with him.
		It's a shame I cannot have the same appraiser again as we established a good rapport.

Table 2.2 Negative comments about the appraisal process

Broad themes	Sub-themes	Examples of comments illustrating the themes
Collecting the evidence	MAG Form	The MAG form is increasingly difficult to use on different computer systems as in its current form it is often not recognised on apple systems. This limits ability of doing it on home computers

		<p>The MAG form remains ridiculously time consuming..... The actual appraisal discussion is always enjoyable and NOT the problem; the MAG forms are the problem!</p> <p>I find MAG form difficult, and cannot attach everything as is gets full. I am not aware that there is any IT support for this, and find this the most stressful part of the appraisal process</p> <p>I found the appraisal process this year frustrating. The MAG form would not download to my computer. I had to borrow a computer for a day. After 6-7 hours of work the MAG form would not save any of the material. I had to do it all again on another day. It then had to be saved and sent on a borrowed computer. Since I don't own a PC and use iPad this made it impossible to use a MAG form at home. This makes it very awkward to prepare for appraisal as I had to borrow a laptop when I needed to work on my MAG form. I would appreciate it if the forms could be usable on an iPad. This is clearly nothing to do with Dr X but is a comment on the software</p> <p>I would prefer to have a log in and on line MAG rather than having to down load and then only having a copy on one computer</p>
	Clarity	I was sad that the clarity system is no longer supported by the college and so I lost 9 months of data, reflection etc which I had been storing on the system.
The process is unnecessary	I would be doing this anyway-don't need appraisal to make me do it	<p>I cannot say the appraisal process is useful in these areas - the appraisal process enables logging of activity I would already be doing and I do not feel the process aids this</p> <p>I get very little out of the process-never have really-maybe it's a generational thing-I feel I have always marinating update training and education through personal interest as well as duty</p> <p>As a professional, I would be trying to improve care and maintain quality even if I wasn't appraised. I don't think the appraisal adds to that.</p> <p>I feel the whole Appraisal process is overdone being annual and for me it doesn't encourage me to be more 'complete' in my professionalism as all the areas you look at I'd have done anyway without an Appraisal procedure</p>

		<p>I do not think being made to 'jump through hoops' makes me a better Dr - I was doing self learning before the appraisal process added more requirements</p>
	<p>Just a tick box exercise</p>	<p>The process has become meaningless to a large degree and is simply a tick box exercise. The allocation of appraisers who have no day to day knowledge of working with you has been massively detrimental to the concept that the appraisals are formative opportunities for development rather than summative assessments</p> <p>Appraisal now feels more like a checklist of requirements for revalidation rather than a valuable opportunity for reflection and career development after more than 20 appraisals the process is time consuming but not very beneficial, in my opinion. This is not a reflection on the appraiser, who was great, but on the huge, bureaucratic, box ticking system</p> <p>It feels like a box-ticking exercise and quite a lot of time is actually spent creating the appraisal document and gathering information; not particularly useful</p> <p>.</p>
<p>Time Pressures</p>	<p>Takes up time which would be better spent on clinical work</p>	<p>It is time consuming and detracts from clinical time adding to everyone's stress and workload. Anyone can make a good portfolio</p> <p>Takes a lot of time to write everything up, time I feel would be better spent learning.</p> <p>.....I feel I'm often repeating work that I've read about in the workplace and then writing up again at home. So it still feels time heavy.</p> <p>I feel I spend more time recording my learning than actually learning, so a lot of time is used writing it all up (and filling in questionnaires afterwards) that I could have spent learning something useful.</p> <p>This is no disrespect to my appraiser - no problems - just I am doing all this work and it doesn't help to write it down - it takes time any from me actually doing my work - it is onerous but doesn't bear any fruit for me</p> <p>I feel a bit frustrated as it involves lengthy preparation, time and effort to prove that I am doing what I am meant to be doing, in other words it is not making me do things differently just taking up extra time which could go towards further learning or patient care or even time off!</p>

		<p>I am a conscientious professional and maintaining high standards is a sine qua non for me. The appraisal process, by consuming so much time diverts me from clinical work and from better use of my time for professional development.</p> <p>Takes hours of time to collect and submit information- at least 1 week work in total- very onerous</p>
	Takes up time that adds to GPs stress	<p>I do my own development and practice development as a professional it is not to do with the forcing on me of an annual appraisal or revalidation. This just means I have to spend time documenting outcomes to provide proof in a specific format. I do not find this useful just another burden on my time and morale</p> <p>-The time taken to complete the appraisal process is often felt to be detrimental in the additional time taken out of personal and professional life to compete Not useful for personal development is not a reflection on my appraiser. Having to do even more admin work is detrimental to my personal development. I spend enough time at work as it is. I did my appraisal during annual leave</p>
Other	Does not address the bigger issues within the NHS	<p>No matter how 'good' the appraisal is, it cannot address the dire state of the NHS, nor help recruitment nor prevent early retirement. Any improvement in patient care is out weighed by excessive work load and chronic underfunding. Sadly the appraisal process (NOT the appraiser) fails to highlight these factors</p>
	May be leading to poor morale and GPs retiring early	<p>Good doctors aim to improve patient care and develop professionally without being treated like primary school children. The appraisal process helps to destroy the trust between doctors and the GMC. It is NOT a transparent process and there are on-going concerns it is used by the GMC to beat doctors with - the profession is suffering from poor morale, in part I believe, due to this process.</p> <p>I suspect that the current appraisal system with the associated paperwork is a reason that senior GPs are all retiring early! Appraisal and revalidation are two of the reasons I shall be retiring shortly</p>

		The stresses induced by the process reduce my effectiveness as a GP and my enjoyment of my career. It is likely to contribute to my early retirement
	Does not identify struggling doctors	<p>I think more emphasis on a 3rd party collecting performance data routinely, plus objective tests on clinical knowledge would enhance the appraisal/revalidation process.</p> <p>The appraisal process does not really help my development. You can be a good GP and struggle to complete your appraisal. You can be a bad GP and sail through. I have witnessed the latter. Perhaps reviewing random cases would be the better way to do appraisals.</p> <p>Once again, this is nothing against my appraiser.</p> <p>I feel that this adds a significant amount of work to an already stretched workforce and does not identify struggling doctors.</p> <p>I don't feel that the appraisal process is a good way of improving patient safety and ensuring competent doctors,</p>

Table 2.3 Negative comments about the appraiser

Broad themes	Sub-themes	Examples of comments illustrating the themes
	Time –rushed not enough time for discussion/reflecti on-not adequately challenged [4]	<p>Appraisal was about support and formative development. It has been a tick box exercise for the last 3 years with X and I have found it dis-spiriting. I took me several days to recover from it. That's not right</p> <p>Appraisal jumped about. Did not work through MAG. Did not open MAG during appraisal. Did not feel structured. Felt rushed. Unaware of changes to appraisal requirements re child safeguarding, although did clarify this with appraisal lead 2 weeks later and come back to me.</p> <p>I was surprised how short the discussion was.</p> <p>I was advised my form was well completed so not a lot we needed to discuss.</p> <p>I would have hoped contents of evidence would have led to more discussion and reflections</p>

		I was surprised how short the discussion was. However, given I am also an appraiser I would have hoped for more discussion and reflection on my work, about the current problems in Primary Care, do I enjoy my appraisal work.....
	Did not feel supported or understood-lacking in empathy-appraiser more interested in the process [box-ticking] than the appraisee-inflexible [4]	I felt that X lacked the personal empathic touch. Maybe he is new to the process and that's why it came across as very formal I don't think he really understood me , I felt deflated and almost ready to give up after the appraisal. Previously with other appraisals I have felt invigorated and ready for another year
	Having to travel to the appraisal [4]	Venue was not of my choice - was asked to travel to appraiser's practice for each of 3 appraisals (30+ minute drive for me).
	Summary cut and pasted [1]	There was evidence of 'copying and pasting' of my work into the summary, because I read some of my exact phrases in there e.g. 'I did this' had not been changed to 'she did this'.
	Needs better listening skills [1]	Being a core skill, listening definitely needs improvement

Conclusions and Recommendations

This analysis of GP feedback to their appraisers about their appraisal, over an eight-month period from April to December 2018, showed an overwhelmingly positive response. For most of the GPs who completed the feedback survey, their appraiser was valued for being supportive, helpful, knowledgeable, and for challenging appropriately, providing appropriate direction for reflection and future planning and 'being there' for doctors under stress. There were very few negative comments about the appraiser. The appraisal process was also valued by most respondents, although a number of concerns were raised, including the time required to engage in the process, some difficulties with the MAG Form, and a perception that appraisal had moved from a formative process to a 'tick box' exercise that might be contributing to low morale and early retirement amongst some GPs. The views of the 48% of GPs who did not respond to the survey cannot be estimated, so we do not know how much these reported positive views are representative of the GP population as a whole.

Even though the number of negative comments from this analysis is relatively small, it is important for us to try and respond to all the core concerns raised in this survey. The following recommendations aim to address the areas of dis-satisfaction listed in Tables 2.2 and 2.3.

Recommendations:

1] National

- RMS
 - To encourage the programmers who service the Revalidation Management System to find a way to collate the all numerical and free text feedback responses to provide a regular summary for appraisal teams
 - To consider sharing this feedback between regional team
 - To consider re-drafting the current feedback form to allow easier coding of free text responses

2] National and Local

- Time pressures
 - To continue to educate GPs on the basic minimum of evidence required each year, and strategies for easy recording of learning such as electronic learning diaries, apps that synchronise with electronic toolkits
- Appraiser skills
 - No GP should complete an appraisal feeling demoralised or de-motivated, or feeling that they have been 'short-changed' in terms of time spent on the appraisal or opportunities for reflection. GP feedback needs to be regularly monitored to identify any trends of discontent with any specific appraiser, and every GP should have an annual performance review, which includes reflection on their appraisee feedback, and any actions that need to be taken
- Appraisal leading to low morale/early retirement and Appraisal as a 'tick-box' exercise
 - To continue to educate GPs and appraisers on the 'soft reboot' of appraisal- basic evidence needs to be submitted but there should be plenty of time to address issues of support, responses to stress and distress.
 - To provide GPs with advice on dealing with stress and burn out, use of GP Health service and Retainer Scheme options for GPs who want to stay in the work-force without the responsibility of a partnership, or those who want to develop a portfolio career with a sessional GP commitment
 - Appraisers need to be kept updated in skills of active listening, identifying the GP's agenda, and awareness of how and where to sign post struggling GPs to local sources of support
 - Appraisers also need regular skills practice in the art of balancing challenge and support and to make sure these techniques are applied at the appropriate level both for GPs who are performing very well and can be pushed to do more, and for GPs who are under professional and/or personal pressure who need 'hand holding' and support

3] Local

- The MAG Form

- To ensure that all GPs are fully aware of the alternatives to the MAG Form. The three electronic toolkits widely used by GPs-Fourteen Fish, Clarity and GP Tools are all commercial products and NHSE cannot be seen to promote one over another.
- But appraisers should be familiar with all three toolkits and be able to offer advice to GPs who are experiencing difficulties with the MAG Form.
- The six monthly appraisal newsletter and the NHSE Cumbria and NE appraisal website should also contain up to date information about the three toolkits
- Length of the appraisal meeting
 - Although almost all appraisees recorded satisfaction in relation to the length of their appraisal meeting, it is felt that appraisers should always aim for an encounter that takes between 1.5 and 2.5 hours.
 - There may very occasional circumstances where the meeting exceeds 2.5 hours –this should always be in relation to the GP’s needs on that day , and not because the appraiser is typing up the appraisal summary in the GP’s presence
 - It is felt that appraisals which take less than an hour are very unlikely to do full justice to the process and to the preparation made by both parties for the meeting
- Travel issues
 - Appraisers to be reminded that it is the responsibility of the appraiser, not the GP, to travel to the appraisal, and GPs should only be asked to travel to be appraised by mutual consent

If all these issues are addressed, this will go some way towards ensuring that appraisal becomes seen by all GPs as a valuable process that supports and nurtures them as individuals, as well as delivering Revalidation.