

[Clinical Governance]**No: DMG (01)
Procedure for GPs who have not had an
appraisal in the last 2 years**

Version	1
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Section 1: Introduction

1.1 Introduction

1.1.1. This document sets out the procedures for the North of Tyne Primary Care Organisations, namely Newcastle PCT, North Tyneside PCT and Northumberland Care Trust (from now on referred to as the three PCO's), to adopt in response to non appraised GPs on the Medical Performers List (MPL) of the 3 PCO's.

1.2. Purpose

1.2.1 This procedure outlines the North of Tyne procedure to be applied to GPs who have not had an appraisal in the last 2 years.

1.3 Duties and Accountability

1.3.1 The Performance Advisory Group (PAG) will be the responsible committee for monitoring these procedures and updating them as required.

1.4 Definitions

Medical Performers List (MPL) – any doctor who wants to perform general medical services (GMS) or personal medical services (PMS) must be registered on a Medical Performers List.

Family Health Services Appeal Authority (FHSAA). The FHSAA is an independent non-departmental tribunal controlled by the President. The FHSAA is completely independent of the Department of Health, is not a

Special Health Authority, and it is not accountable to the Secretary of State for Health. Appeals and Applications are made to it directly.

1.5. Related Documents

Appraisal Policy

NHS (Performers List) Regulations 1004

Section 2: Procedure for GPs not appraised within the last 2 years.

2.1 Background

2.1.1 The requirements of the NHS (Performers Lists) Regulations 1004 in relation to appraisal are set out in regulation 9, as below:

Regulation 9: Requirements with which a performer in a Performers List must comply

“A performer, who is included in the Performers List of a PCT, shall, except where the relevant part provides to the contrary;

a) Participate in the appraisal system provided by a PCT; and

b) If the appraisal is not carried out by the Trust in whose list he is included, send that Trust a copy of the statement summarising that appraisal.

[Regulation (9) (7)]”

“A performer who is included in a relevant Performers List of a PCT, shall act in accordance with the undertakings that a performer is required by these regulations to provide when applying for inclusion in that relevant Performers List.”

[Regulation (9)(6)] [This refers to Regulation 4(3) (a)]”

2.2 Using the Procedures

2.2.1 These procedures should be used when it becomes apparent that a GP is not engaging with the local appraisal process

2.2.2 The appraisal management team will identify GPs who do not meet the appraisal criteria for inclusion on the Medical Performer List. A report identifying all communication and correspondence with the doctor during the proceeding 2 years will be prepared for the Medical Director or deputy.

2.2.5 A final letter (recorded delivery to the address confirmed by the GMC) will be sent from the Medical Director or deputy reminding the doctor of their obligations under the regulations and giving 28 days within which to respond. The letter will advise that failure to respond will initiate proceedings within the 3 PCO’s for removal from the list under Regulation 10(3) and (4) on the grounds that their continued inclusion would be prejudicial to the efficiency of the services which those included in the relevant Performers List perform.

2.2.6 If no response, a report will be presented to the PAG for discussion.

2.2.7 A PAG report and recommendations are provided for the DMG.

2.2.8 If DMG agree with the PAG advice to take action via the MPL regulations a letter is sent recorded delivery to the practitioner outlining:

- a. previous correspondence
- b. Serving notice of intent to remove under Regulation 10 (3) and (4) by virtue of Regulation 11 (1) (a) for failure to comply with Regulation 9 (7).
- c. Extending opportunity to submit written representations within 28 days of the date of the letter as required by Regulation 10 (8) (c) and,
- d. Extending opportunity, within same 28 day period, to indicate if they wish to put their case to an oral hearing with the PCT.
- e. Confirming that if no representations are received within the 28 days, the PCT shall decide whether or not to remove them and, within 7 days of making the decision shall notify them of the decision and the reasons for it (including any facts relied upon) and their rights of appeal under Regulation 15 (2)(d)

2.2.9 If no representations are received within the 28 days the PCT Decision Making Group will request that a panel be convened for removal from the MPL.

2.2.11 The practitioner is formally notified of the rights of appeal and cascade the decision to all the parties specified in Regulation 16 (2)

2.2.12 Practitioner then not removed from list until either expiry of appeal period (30 days from date of notification) or final determination of appeal by the FHSAA in Harrogate.

Section 3: Document Consultation, Approval & Ratification

3.1. Consultation

3.1.1. This document has been produced by the Performance Advisory Group.

3.2. Document Approval & Ratification

3.2.1 The Performance Advisory Group is the committee with delegated authority for the approval and ratification of this document.

3.2.2. This procedure was formally approved by the Performance Advisory Group (7th August 2008).

3.3. Review

3.3.1.1 This procedure will be reviewed every 3 years by the Performance Advisory Group or as and when significant changes make earlier review necessary.

Section 4: Distribution & Implementation

4.1 Distribution

4.1.1. This procedure is available for all staff to access via the Infonet/extranet. Staff without computer network access should contact the PCO for information on how to access procedures.

4.2 Implementation

4.2.1. The procedure will be implemented by the Performance Advisory Group who will report to the Decision Making Group

Section 5: Monitoring Compliance

5.1. Monitoring Compliance

The Performance Advisory Group will monitor compliance of this procedure. Quarterly reports will be presented to the Performance Advisory Group or as and when deemed necessary.

References

NoT MD01 "Policy for handling concerns about the professional performance of independent healthcare professionals".
GP Appraisal Evidence Checklist

Useful Contacts

Deputy Medical Director, NHS North of Tyne

Associate Director, Clinical Governance, Performance and Appraisal