



- Appraisal for medical staff
- Developing a clinical performance monitoring framework

Where we are now?

Expectations:

- Accountability
- Openness
- Demonstrating a quality service

From:

- Patients
- NHS
- Government/politicians/media
- Doctors

Clinical & Social Care Governance
Statutory duty for quality & safety

- The Challenge**
- **Active participation**
 - **Buy-in by medical staff**
 - **Dealing with scepticism**
 - **Monitoring & dealing performance**
 - **Confidentiality**

- Consultant Appraisal -Evaluating the process**
- **Structured questionnaire**
 - **55% return rate**
 - **Key findings presented to Trust Board, clinical directors and Chief Medical Officer**
 - **Action Plan developed**
 - **Report on clinical governance intranet site**

- Evaluation - appraiser**
- **73% spent between 1-3 hours on preparation**
 - **Meeting lasted on average 1 – 2 hours (73%)**
 - **27% appraisees not prepared for the interview.**
 - **93% appraisers felt they were able to cover relevant issues**
 - **40% appraisers found process very good**
 - **60% appraisers found process satisfactory**

Evaluation - appraisee

- 3-7hrs = 42.5%
- >7hrs = 46.9%
- 64.5% Able to access information in support of appraisal
- 73% agreed future development needs
- 45% rated appraisers skills as good, 25% very good, 22% satisfactory
- 90% stated appraiser was effectively prepared for interview

Key Themes - appraiser

- Concerns re lack of data and information to support evidence
- Inconsistency in evidence provided in appraisal folder
- Time required to complete appraisal meeting & preparation for meeting
- Resources for CPD
- Documentation
- Training

Key Themes - appraisee

- Improved data (complaints, incidents, compliments, audit)
- 360° appraisal (peer & patient)
- Activity levels, waiting lists
- comparisons peer team & external benchmarking, mortality/morbidity statistics
- Protected Time (preparation & Meeting)
- Resources (finance, admin support)

Action

- Pilot 360 degree and patient questionnaire
- Improve access to clinical information and other sources of data
- Implement QA checklist
- Produce guidelines on appraisal process
- Training
- Link with revalidation
- Integrate with management structures and clinical governance arrangements

Clinical Governance Reporting Programme

- Aims to provide comparative data that is accurate, timely and clinically relevant
- Developed in consultation with senior clinicians & managers
- Data at corporate, directorate, speciality and individual level
- Provides evidence to support monitoring and performance review
- Provides external peer comparison and early warning trends
- Assists with appraisal & revalidation
- Promotes clinical ownership & accountability

Clinical Divergence

Specialty / HRG	RBHSC FCEs	RBHSC Beddays	RBHSC AVG LoS	Days Variance Vs RBHSC	Peer Avg LoS Trimmed	Days Variance Versus Peer
Paediatrics / P03						
- Upper Respiratory Tract Disorders						
Cons1	57	106	2.1	1.9	1.2	-40
Cons2	51	77	1.5	1.5	1.2	-18
Cons3	40	60	1.5	1.5	1.2	-14
Cons4	30	61	2	2	1.2	-26
Cons5	27	60	2.2	2.2	1.2	-29
Cons6	26	38	1.5	1.5	1.2	-8
Cons7	21	31	1.5	1.5	1.2	-7
Cons8	21	31	1.5	1.5	1.2	-7
Cons9	19	155	8.2	8.2	1.2	-133
Cons10	1	0	0	0	1.2	1

Complications

Complication (Diagnosis)	FCEs	% Comps	Peer
Complicat' other internal prosth devices implants & grafts	44	0.41%	0.16%
Postprocedural disorders of digestive system	35	0.32%	0.07%
Complications of procedures not elsewhere classified	30	0.28%	0.36%
Other complications of surgical and medical care	11	0.10%	0.07%
Complicat' cardiac & vascular prosth devices implants & grafts	10	0.09%	0.25%
Failure and rejection of transplanted organs and tissues	9	0.08%	0.08%
Complications peculiar to reattachment and amputation	6	0.06%	0.02%
Postprocedural disorders of genitourinary system	5	0.05%	0.01%
Complicat' of internal orthopaedic prosth devices implants & grafts	4	0.04%	0.05%
Postprocedural disorders of nervous system	2	0.02%	0.00%

Complications

Complications Top 10 by Consultant			
Complications by Consultant/Spec	FCEs	%	Peer
Cons1	27	5.07%	2.42%
Cons2	21	3.86%	2.42%
Cons3	20	3.54%	2.42%
Cons4	17	2.60%	2.42%
Cons5	11	17.19%	11.48%
Cons6	9	11.11%	11.48%
Cons7	6	0.60%	1.23%
Cons8	6	1.40%	1.15%
Cons9	5	1.64%	1.60%
Cons10	4	0.91%	1.15%

CG Reporting – practical use

- Directorate reports & summary of emerging findings issued
- CD & DM explore issues with clinical colleagues & agree action plan with governance team (MD, CGM, IM)
- Further analysis or data provided
- Report and action reviewed at accountability review
- Report used for appraisal and performance review

Benefits for the Profession

- Ensures quality assurance in line with Clinical Governance in NHS
- Assist with planning CPD
- Vehicle to help ensure competence
- Provides early warning system
- Reassures the public that the profession is open to peer review
- Supports public pressure on accountability and transparency

Thank you

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