

## Medical teacher's appraisal: New challenge for European family medicine teachers

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A professional appraisal can be defined as the process whereby an appraiser examines and evaluates an appraisee's work by comparing it with pre-set standards [1]. This process is generally designed to encourage the professional to reflect on his or her work and to provide evidence that the required standards are being achieved.

A recent example about use of appraisal is the process for the appraisal of teaching performance in General Practice/Family Medicine [GP/FM] which has been developed by EURACT, the European Academy of Teachers in GP/FM in collaboration with other partners and funded by the Leonardo da Vinci Programme of the EU [8] [9].

Family Medicine is characterized by its specific set of knowledges, skills and attitudes. While family medicine is a young specialty in most European countries, in a few countries it is still not so recognized. Therefore, it is necessary not only to demonstrate the values of family medicine, but also to continue the positive development of training programmes for current and future general practitioners/family physicians.

The European Academy of Teachers in General Practice and Family Medicine (EURACT) has developed a model of an international appraisal of family medicine teachers.

The introduction of this Appraisal Portfolio has a triple purpose:

1. To support, develop and recognise the standard of the individual trainer/teacher
2. To demonstrate the existing standards of education/ training in GP/FM in Europe and to enable further development
3. To enable the coordination of GP/FM training throughout the countries in the EU ( key factor )

EURACT's 'Framework for Continuing Educational Development of Trainers in GP/FM in Europe' has been the background document for the development of the appraisal process for European Family Medicine Teachers. Teachers of FM/GP will present evidence to demonstrate how the competencies as

teacher identified in the framework are being achieved. Applications are made for two levels of competence – competent or expert, with the assessment paradigm transformed as moving from competence to expertise. The evidence is peer reviewed electronically and a decision reached as to whether the competencies have been achieved. Schemes for the type of evidence required have been made and descriptors provided for the standards required for the award of 'competent' or 'expert' [10].

This is a developing field and an important ongoing work is done to review the effectiveness of appraisal in supporting doctors in their professional teaching development and as a tool for medical regulation.

Appraisal in large has been used increasingly over the years in medicine in an increasing number of Countries and now forms the basis for the revalidation of doctors in UK and other Countries. Revalidation is the process by which licensed doctors should demonstrate that they remain up to date and fit to practise, by showing they can self-correct in terms of learning. Revalidation is based both on clinical governance processes and regular annual appraisal and occurs every a fixed number of years. In UK, the GMC is said to be the first medical regulator in the world to implement such a comprehensive compulsory revalidation process [2].

The British Medical Association, the UK's professional body for doctors, has defined the overall aim of appraisal (its own definition) as a process of facilitated self-review supported by information gathered from the full scope of a doctor's work [3]. In addition to satisfying the need for revalidation, appraisal can be used to enable doctors to reflect on their practice, plan their professional development, identify learning needs and ensure that they are working in line with the priorities of their organisation [3].

In this EURACT Appraisal Procedure for Family Medicine Teachers, the applicants must fulfil 9 on 13 domains:

- Learning environment

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- Patient safety
- Management of learning
- Educational resources
- Teaching skills
- Educational supervision
- Management of problems
- Assessment and feedback
- Teaching theory
- Working in educational teams
- The curriculum
- Educational research
- Quality improvement

One of the challenges of implementing a nationwide system is that the processes may be applied in different ways in different settings. Work is ongoing to ensure that the processes surrounding revalidation are as robust and evidence based as possible given the current level of research in this area. A pilot study of enhanced appraisal [5] was done prior to the implementation of revalidation and this found improvements in the quality of appraisal as measured by doctor's participation in significant event reviews, case reviews and the feedback from appraisals on the quality of appraisals. Over 80% of the responding participating organisations and over 70% of the responsible officers expected the full roll out of revalidation to lead to improved patient safety, improved quality of care and improvements in the patient experience.

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