

*To consider*

## Council Member Appraisal

### Issue

1. The process for Council member appraisal needs to be updated to reflect the current role and requirements, in the light of the reconstitution of Council.

### Recommendations

2. Council is asked to:
  - a. Note plans to review the Competency Framework for Council member appraisal.
  - b. Consider the proposed amendments to the process for and frequency of Council member appraisal.
  - c. Note the timetable for Council member appraisal in the 2013-2016 term.
  - d. Authorise the Chair of Council to agree any consequential amendments to the description of the arrangements for Council member appraisal as set out in Annex C2 of the Governance Handbook.

## Issue

3. The current arrangements for Council member appraisal have been in place since 2005, with some changes being introduced to the process following reviews undertaken in 2009 and 2011. They now need to be updated to reflect the current nature of the role and requirements agreed for the reconstituted Council from 1 January 2013.

4. The current process for Council member appraisal is shown in Annex A and described in Annex C2 of the Governance Handbook (Annex B). The appraisal process is also supported by a Competency Framework, and a 360 degree/multi-source feedback system, which are used to inform an individual member's appraisal. The process is currently the same for the Chair of Council as for Council members, except that the appraisal meetings are held with one or more of the chairs of the two Governance Committees, the number involved to be decided by the chairs of the two Governance Committees acting together.

### *Proposed changes*

5. The Summary self-assessment appraisal form (Annex C) has been updated to reflect the core competencies for Council members that were agreed by Council in 2012 as part of the review of the role and requirements for a reconstituted Council and which informed the appointments process. The Competency Framework which underpins this (Annex D), with examples of expected performance, was developed some time ago and to reflect the role and requirements of a Council of 24 with a different governance model. It also applied equally to the Chair of Council as to members, as the Chair was (until 2012) appointed on the same basis as other members and then elected by his peers and it was considered that the same competencies should apply. However, the changes that were introduced in 2012, namely, an independent appointment process, with additional competencies required for the Chair role in relation to leadership and acting as an ambassador/representing the GMC externally, suggests that the Framework should be updated to reflect this.

6. We consider that the Framework would therefore benefit from a review to bring it up-to-date and fit for purpose to reflect the changes that were agreed in 2012 as part of the revised role description and requirements of both members and Chair, and the new governance model introduced in 2013. We propose to secure some external assistance with the review, from consultants with relevant expertise in this area. Council is asked to note plans for the review, which is expected to be completed in Q1 2014. The revised Framework will be brought back to Council for consideration.

7. During discussion at the Council awayday in June 2013, it was suggested that the process for member appraisal should include self-assessment in Year 2, in addition to the 360 degree/multi-source feedback and Chair's assessment. We consider that this would be a helpful addition to the process in that it would provide a complete view of a member's performance and contribution, based on a summary self-assessment report referencing both the Competency Framework and the multi-source feedback that had been given.

8. The frequency of appraisal also needs to be considered. As part of the governance changes to the Councils of the healthcare regulators, the Professional Standards Authority introduced guidance on good practice in appointments. This includes guidance on Council member appraisal, such as:

*' 5.1 Performance appraisals should be carried out regularly – ideally, annually – throughout the term of appointment, not just prior to a possible reappointment. Ongoing assessment recognises the contribution council members have made and provides them with feedback advice and the motivation to improve performance. It also provides evidence if needed, for recommendations on whether or not council members should be recommended for reappointment.'*

9. Council may consider that moving to annual appraisal would provide a useful opportunity to reflect on and to motivate performance on a more regular basis, as well as reviewing ongoing education and training needs.

10. Council will be aware that as part of revalidation, doctors are expected to participate in annual appraisal, and that this will apply to medical Council members. For these Council members, appraisal for the purposes of revalidation will be conducted by their employer or, in the case of those with no prescribed connection, an appraisal will be carried by the Chair of Council when required to inform a recommendation for revalidation from the Responsible Officer, based on the requirements in our guidance, *Good Medical Practice Framework for Appraisal and Revalidation*.

11. It should be noted that appraisal is also conducted on an annual basis for GMC staff as part of the performance review system, and also for the Chair of the Medical Practitioners Tribunal Service (whose appraisal is carried out by the Chair of Council).

12. Should Council decide that it would be appropriate to amend the current arrangements so that appraisal is conducted annually, it will also need to determine what would be proportionate. The current system comprises appraisal in Years 2 and 4 of a member's term of office. The only exception to this timetable is where there is the possibility of reappointment not being recommended. In these circumstances, an additional appraisal discussion would be scheduled for Year 3 of a member's term.

13. Given the experience that a member is likely to have gained by the end of the first year, it may be thought that the process in Year 1 should be relatively 'light touch'. This could comprise an end of year appraisal discussion and meeting with the Chair of Council, based on self-assessment and the Chair's assessment.

14. Given that the process is more intensive in Year 2, and that a member's experience may be developed in Year 3 in the light of any changes to Committee membership (reviewed at the mid-term point), it may be thought sufficient that the process in Year 3 is the same as for Year 1. This could also provide an early opportunity for discussions relating to a member's intentions as to seeking possible reappointment, if applicable.

15. The Summary self-assessment Appraisal form (Annex C) could be used to support the process in Years 1 and 3 should annual appraisal be introduced.

16. The appraisal process needs to be fair, consistent and free from discrimination. Having a clear framework of what is expected in term of competencies, and examples of behaviours, helps ensure consistency and fairness in assessing an individual's performance. Guidance and advice will be available to support the process, and we will also provide any additional training that may be required, including in relation to the Equality Act 2010 and the Public Sector Equality Duty.

17. Subject to Council's agreement to the proposed amendments, the timetable for member appraisal in the 2013-2016 term would be:

a. November/December 2013 and January 2014: one to one appraisal meetings with Chair of Council, informed by self-assessment

b. November/December 2014 and January 2015: one to one appraisal meetings with Chair of Council, informed by self-assessment and 360 degree/multi-source feedback (based on revised Competency Framework)

c. November/December 2015: one to one appraisal meetings with Chair of Council, informed by self-assessment

d. July-September 2016 tbc: one to one appraisal meetings with Chair of Council, informed by self-assessment and option for 360 degree/multi-source feedback, for members eligible for reappointment. It should be noted that this timing is indicative at this stage and would need to be aligned to meet the requirements of the process in line with the timetable for the scrutiny process undertaken by the Professional Standards Authority and with that required by the Privy Council in making the appointments, which will need to be agreed in 2016 ahead of the process starting.

18. Council is asked to consider the proposed amendments. Subject to what is agreed, the description of the arrangements for Council member appraisal set out in Annex C2 of the Governance Handbook may need to be updated. Council is asked to agree that the Chair of Council is authorised to agree the amended section of the Governance Handbook on its behalf. An updated version of the Governance Handbook will then be published and circulated to members for information.

## Supporting Information

### How this issue relates to the corporate strategy and business plan

19. Strategic Aim Seven of the Business Plan 2013 states that we will continue to use resources efficiently and effectively, changing our governance framework, decision-making processes and ways of working to ensure effective transition to the reconstituted smaller Council.

20. The proposed amendments aim to complete actions arising from the transition and to support effective implementation and good governance. The arrangements will also supplement Council's review of its effectiveness as a governing body, due to be undertaken at the mid-term point.

**If you have any questions about this paper please contact:  
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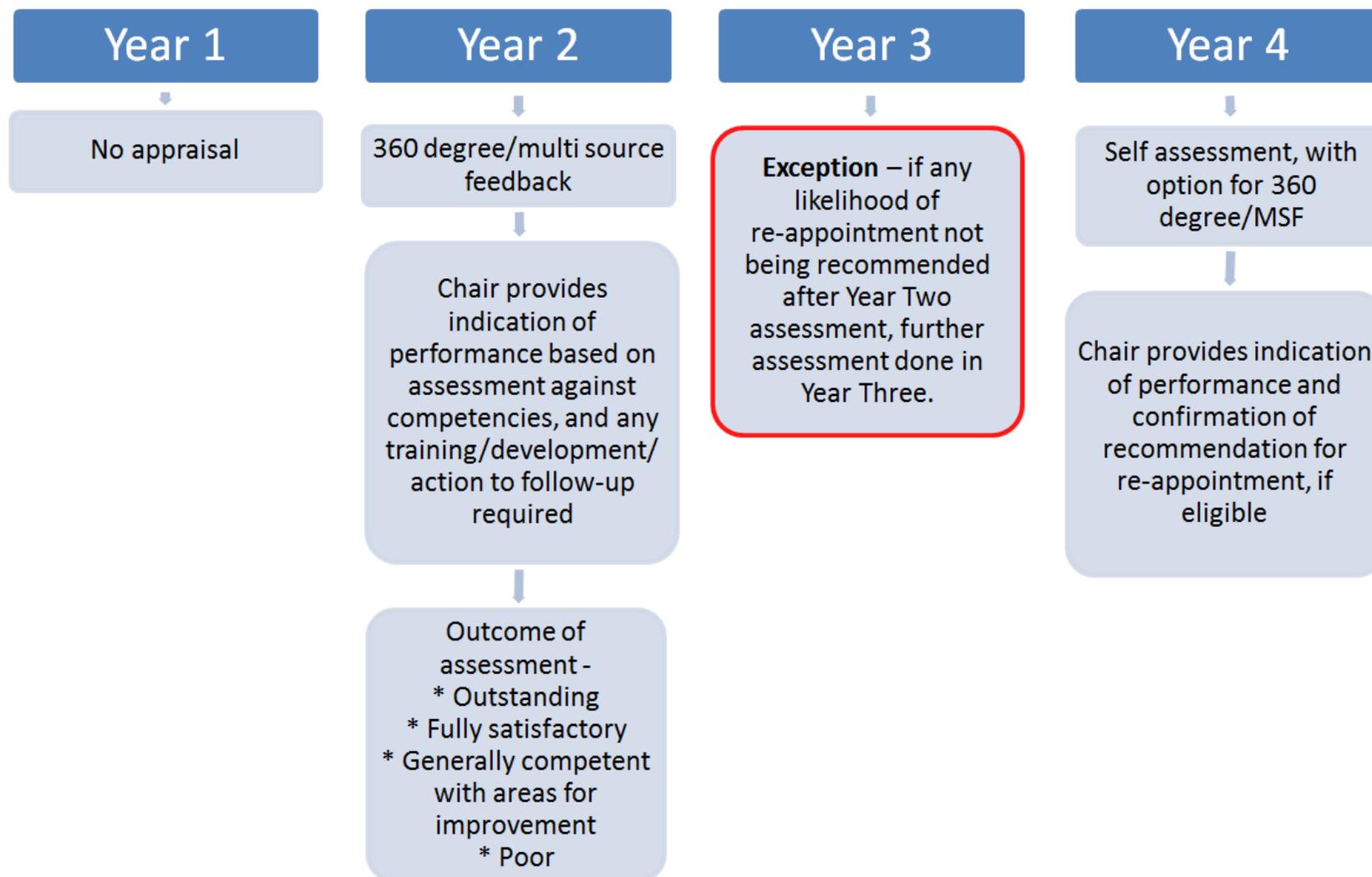
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## Annex A

### Member Appraisal – current system

## Member Appraisal – current system



## Annex B

### Annex C2 of the Governance Handbook - Member Induction, Appraisal, Education and Training

## **Annex C2: Member Induction, Appraisal, Education and Training**

1. Part 2 Paragraph 4 of the GMC (Constitution) Order 2008 (as amended) requires the GMC to make provision in Standing Orders about the requirements with regard to education and training of members. Members are expected to participate in induction, appraisal, education and training.

### *Induction*

2. Induction arrangements are made available for all Council members following confirmation of appointment. This includes the opportunity to meet the Chair of Council, Chief Executive and other members of the senior management team. Members receive a welcome pack which includes key information as required to support them in their role. During induction, members receive advice and guidance on the appraisal system and IT facilities available, and the policy on remuneration and claiming expenses.

### *Appraisal*

3. The member appraisal cycle is based around two appraisal meetings between the Chair and member, one in the second and another in the fourth year of a member's term of office.

### *Multi-Source Feedback, external support, and the appraisal meeting*

4. A 360 degree/multi source feedback system will provide an individual report to underpin the first appraisal discussion scheduled for the second year of appointment.

5. This first stage of the appraisal process (in the second year of a member's term) will be scheduled at a time which provides meaningful feedback for members. It will also be early enough in the members' term of office to allow any action points to be worked on.

6. While multi-source feedback is a key component of the process, the system of providing feedback is flexible. This includes the number of people feedback is sought

from, and who they are. It could include other Council members, senior GMC staff, or colleagues in other organisations. Feedback should generally be sought from a group of around six people, but this is an individual member's choice. The suggested minimum is four people.

7. The report summarising the results of the feedback is personal to the member and provides background to the first appraisal meeting with the Chair. It is not circulated outside this discussion and will not form part of the documentation shared with the Privy Council as part of the reappointment process.

8. The support to which members have access in reviewing their feedback and preparing for their appraisal discussion will be in line with members' individual preferences.

9. This first appraisal will allow any training needs to be highlighted and followed up with individual members. Following the first appraisal discussion the Chair will provide an initial indication of performance based on the overall assessment levels in the Appraisal Summary Form as approved by Council.

10. A second appraisal discussion with the Chair will then be scheduled for the final year of a four year term. This will include confirmation of whether reappointment is recommended, in line with the overall assessment levels set by Council. This discussion will not normally be prefaced by a 360 degree process, but this will remain an option for individual members who would find this useful.

11. The timing of the second appraisal discussion will fit with the appointment/re-appointment process, so appraisals will be scheduled to meet the relevant requirements.

12. The only exception to this timetable will be where there is the possibility of reappointment not being recommended. In these circumstances it is anticipated that an additional appraisal discussion would be scheduled for the third year of a member's term.

13. The appraisal process is supported by the Competency Framework for members.

#### *Using the Appraisal process*

14. While there is an important relationship between individual appraisal discussions and the reappointment process there are other important links. The primary aim of the system is to contribute to the effective governance of the GMC. For individual Council members the process provides them with feedback, an opportunity to review the contribution they have made, and for any individual training or learning needs to be identified and met.

15. The appraisal process for the Chair of Council is as described above, except that the appraisal meetings are held with one or more of the chairs of the two

Governance Committees, the number involved to be decided by the chairs of the two Governance Committees acting together.

*Education and training*

16. In addition to individual learning/training needs identified during the appraisal process, arrangements are made for members to receive briefing and training that may be required to assist them undertake their role. Members may also ask for specific training if they think they require it in order to fulfil their responsibilities as members of Council effectively.

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## Annex C

### Council Member Appraisal Summary Form

## Council Member Appraisal Summary

Term of Appointment: 1 January 2013 to 31 December 2016

General  
Medical  
Council

Regulating doctors  
Ensuring good medical practice

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Council Member		Date of Appraisal
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Council Member's Self Assessment

Chair's comments

## Member Competences: Summary

<p><b>ABILITY TO CONTRIBUTE TO STRATEGIC DIRECTION</b></p> <p>Through anticipating future trends as well as keeping in touch with the current reality is able to provide the Council with insight about their impact on the wider health agenda and focus members and staff on the key priorities</p>
<p><b>ABILITY TO COMMAND THE CONFIDENCE AND CAPACITY TO UNDERSTAND THE GMC'S KEY INTEREST GROUPS AND ENSURE ENGAGEMENT</b></p> <p>Promotes the work of the GMC and actively contributes to supporting effective engagement in policy development and an understanding of the GMC's work</p>
<p><b>ABILITY TO INFLUENCE AND COMMUNICATE EFFECTIVELY</b></p> <p>Able to influence and engage GMC colleagues and external parties by developing and maintaining effective relationships through openness, respect and showing a genuine interest in other people's perspective</p>
<p><b>ANALYTICAL SKILLS AND SOUND JUDGMENT</b></p> <p>Acts as a driving force for getting things done, removing obstacles and completing tasks. Maintains momentum and supports others, and contributes effectively to the collective decision-making process</p>

	<b>Performance level</b>	Confirmed level
4 = High performance	<b>Outstanding</b> Consistently not only meets but exceeds the level of performance required.	
3 = Good performance	<b>Fully Satisfactory</b> Regularly performs highly with potential for even greater consistency of performance	
2 = Threshold performance	<b>Generally Competent with areas for improvement</b> Meets the acceptable level of performance within their role but could perform even higher	
1 = Below threshold	<b>Poor</b> Either fails to or is inconsistent in meeting the behavioural requirements of the role	

Signed	Chair of Council	date
Signed	Council Member	date

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## Annex D

### Council Member Competency Framework

# **General Medical Council**

## **Council Member Competency Framework**

## Performance rating scale

<p>4 = <i>High performance</i></p>	<p><i>'Consistently not only meets but exceeds the level of performance required'</i></p> <p>Individuals performing at this level will consistently be seen displaying the effective behaviour and never the ineffective.</p> <p>This behaviour is likely to have a strong positive impact on their and others performance and should be recognised and valued.</p>
<p>3 = <i>Good performance</i></p>	<p><i>'Regularly performs highly with potential for even greater consistency of performance'</i></p> <p>Individuals performing at this level will frequently (but not consistently) be seen to display the effective behaviour and will rarely if ever display the ineffective.</p> <p>Whilst performing well there is potential for this behaviour to be displayed even more frequently than it is currently.</p>
<p>2 = <i>Threshold performance</i></p>	<p><i>'Meets the acceptable level of performance within their role but could perform even higher'</i></p> <p>Individuals performing at this level could be described as meeting the basic behavioural requirements to perform in their role. Whilst they may be seen displaying the effective behaviour this will not be frequently. They may also show evidence of the ineffective behaviour but this will be less common or only for short periods of time.</p> <p>Whilst there is positive evidence of this behaviour there is also scope for improvement and maybe reduction in the odd ineffective behaviour.</p>
<p>1 = <i>Below threshold</i></p>	<p><i>'Either fails to or is inconsistent in meeting the behavioural requirements of the role'</i></p> <p>Individuals performing at this level will either show very little of the effective behaviour or frequent amounts of the ineffective behaviour.</p> <p>This behaviour is likely to impede their own and others performance and should be considered an area for development.</p>

## TAKING A BROAD PERSPECTIVE

***Through anticipating future trends as well as keeping in touch with the current reality is able to provide the Council with insight about their impact on the wider health agenda and focus members and staff on the key priorities***

### Comments

#### Examples of strong performance

##### *Outward looking*

- Acutely aware of the latest developments relating to the national and international health agenda
- Remains closely in touch with the reality faced by different patient and customer groups

##### *Anticipating the future*

- Looks ahead anticipating developments that could impact upon the GMC and making projections about the future
- Considers the actions being taken by the Council now and their likely impact upon the future

##### *Articulating the vision*

- Describes the strategic goals and direction of travel for GMC in a way that others can understand and relate to
- Displays clear insight into how the different parts of the Council need to work together to achieve their goals

##### *Maintaining strategic focus*

- Focuses themselves and others on the broader goals they are there to deliver and how they contribute to longer term aspirations
- Channels their energy into the key priorities and 'big ticket' items, looks to keep others on track and avoid distractions

#### Examples of poor performance

- Fails to keep up to date or aware of what is going on in the wider health community
- Focuses primarily on the needs of medics rather than patients, out of touch the experience of different patient groups

- Looks primarily at the present rather than considering how the role of the GMC could evolve and things may differ in the future
- Gives little thought or consideration to the impact that actions taken by the GMC will have on future outcomes

- Either lacks awareness of the strategic goals of the GMC or fails to communicate these in simple or engaging way to others
- Gives little thought or guidance into how the Council members, different staff groups and stakeholders need to work together

- Takes a very narrow and detailed view of things e.g. focussing much of their time on cases relating to specific doctors
- Can get drawn into fire-fighting, and allow themselves and others to get sidetracked by lower priority issues

## ACTING AS AN AMBASSADOR

***Acts as an ambassador to the GMC, seeking out opportunities to promote the work of the Council and actively contributes to supporting good planning, policy and practices relating to diversity***

### Comments

#### Examples of strong performance

##### *Externally focussed*

- Invests time and energy with groups outside the Council, creating opportunities to promote the GMC
- Develops and maintains networks, displaying knowledge and insight into other people's organisations

##### *Communicating the corporate message*

- Advocates the corporate view when speaking publicly despite any personal doubts
- Provides a consistent message whether talking to individuals or groups, displaying belief in their view and support for the GMC

##### *Accessible to all parties*

- Accessible, visible and approachable to individuals and groups within and external to the GMC
- Tolerant when the GMC is criticised and able to display empathy whilst remaining loyal to the GMC and corporate message

##### *Interested in others*

- Listens carefully, seeks to understand life from other peoples perspectives and how this affects their perception of the GMC
- Displays genuine interest in the thoughts and views of others and is willing to consult with all parties and individuals.

#### Examples of poor performance

- Does little to promote the work of the GMC or create opportunities for themselves or others to do so
- Focuses most of their attention inwards or on existing relationships rather than developing their network

- Either overtly or subtly fails to give a strong and consistent corporate message to external parties
- Capable of giving different (even conflicting) messages about the GMC and its role to different people on different occasions

- Lacks visibility and does little to make themselves known or available to others
- When the GMC is criticised can become either overly defensive or conspire with the other party to criticise it further

- Ineffective at listening or really taking time to understand life from other peoples perspective
- Only appears interested in the thoughts and views of certain individuals or groups

## UNDERSTANDING AND INFLUENCING

***Able to influence and engage GMC colleagues and external parties by developing and maintaining effective relationships through openness, respect and showing a genuine interest in other peoples perspective***

### Comments

#### Examples of strong performance

##### *Awareness of key stakeholders*

- At any given time keenly aware of the key parties to be engaged in order to gain necessary buy-in and commitment
- Anticipates how different groups might respond to particular policies and engages them early in the process

##### *Preparing the way*

- Talks to Council members and staff before meetings ensuring there are no surprises and individuals are not publically undermined
- Works behind the scenes to engage Council members, staff and key stakeholders to gain their buy-in and commitment

##### *Understanding others perspectives*

- Explores issues from a range of viewpoints rather than just one parties perspective
- Ensures they fully understand where others are coming from and the factors which are of most significance to them

##### *Taking people with you*

- Focuses on the positive comments made by others and the areas they agree with, seeks to find common ground
- Patient and tolerant with those who are slow to grasp or appreciate their perspective

#### Examples of poor performance

- Through either lack of insight or willingness to involve people fails to engage the right parties at the right time
- Fails to consider the impact that certain decisions or actions might have on others and how they might respond

- Due to lack of forethought or not talking to people before meetings can surprise or undermine them in front of others
- Either doesn't understand the need or doesn't invest the time in engaging with colleagues and key stakeholder to gain buy-in

- Will position themselves as representing a particular group or profession in order to peddle their own agenda
- Makes assumptions about what is important to others without first seeking to understand things from their perspective

- Criticises others, finds fault with their argument and draws attention to areas of difference rather than common ground
- Lacks patience or tolerance with those who are slow to see their perspective instead becoming pushy, patronising or dismissive

## DRIVE FOR RESULTS

***Acts as a driving force for getting things done, removing obstacles and completing tasks. Maintains momentum and supports others through eliminating unnecessary complexity and remaining focussed even during difficult times***

### Comments

#### Examples of strong performance

##### *Keeps it simple*

- Provides practical and simple solutions that enable work to continue, conversations to be had and barriers to be overcome
- Eliminates complexity, boiling things down to straight forward priorities others can understand and respond to

##### *Maintains pace*

- Responds quickly to requests, meets deadlines and displays a 'can do' attitude
- Actively speeds things up, works to eliminate red tape and unnecessary debate

##### *Gets the job done*

- Focuses self and others on what will lead to a result, asks 'will this actually work?' and 'can it be followed through?'
- Displays determination to get things agreed and delivered, willing to tackle difficult situations and take bold action where appropriate

##### *Cuts to the chase*

- Quick to distil out the key messages in complex documents or discussions and share these with others
- Able to extract the critical facts and data which enable themselves and others to move forward

#### Examples of poor performance

- Easily diverted by problems, raising unnecessary discussions and drawing in people who do not need to be involved
- Complicates things unnecessarily allowing problems to seem bigger than they are and priorities to become clouded

- Slow to respond to requests, shows little sense of urgency or willingness to change their pace of work
- Appears to slow everything down, may introduce or allow unnecessary red tape to get in the way

- Focuses on ideals rather than the reality of what can be achieved given available time and resources
- Lacks the drive and determination to get things done, refrains from making tough decisions leaving this to others

- Struggles to extract the salient points when reading complex documents or when involved in detailed discussions
- Becomes easily buried when given large amounts of information and fails to provide themselves and others with the critical facts

## EFFECTIVE LEADERSHIP

***Through their energy, enthusiasm, insight into others and ability to resolve conflict either creates or contributes towards the creation of an environment which enables others to perform at their best***

### Comments

#### Examples of strong performance

##### *Supporting others*

- Brings the best out of people, encourages contribution and creates an environment that others enjoy being a part of
- Alert to how others are behaving during meetings and influences the style and pace in a way which works well for everyone

##### *Manages conflict*

- Defuses conflict and tension, brings people together, takes difficult conversations offline if necessary
- Challenges others in a constructive and supportive way enabling valuable discussion whilst avoiding unnecessary tension

##### *Energy and enthusiasm*

- Genuinely enthusiastic and passionate about the role of the GMC and the part they have to play
- Displays energy and positivism even during difficult times, keeps others upbeat and motivated

##### *Enabling the organisation*

- Provides support for the executive and their teams without interfering or becoming involved in the running of the business
- Displays confidence in staff to finish things to high standards on their own without the constant supervision of members

#### Examples of poor performance

- Through either a lack of contribution or behaving in a destructive manner can subdue or suppress others and their performance
- Whether chairing or contributing fails to respond to the way others are behaving and just pushes on regardless

- Brings up contentious issues at times when they could well cause heightened conflict, lacks tact or diplomacy
- Challenges others in a way that get their backs up, causes unnecessary friction and tension

- Shows little enthusiasm for the work they do or pride in the wider role of the GMC
- Often perceived as low energy and glass half empty, does little to motivate or inspire others

- Is either critical of the role of the executive and their teams or becomes overly involved in helping them to run the business
- Looks to micro manage certain staff groups, becoming overly involved in their jobs and preoccupied with irrelevant details