

## Practitioner Performance Advice Insights

### Findings from clinical performance assessments

February 2022

Practitioner Performance Advice undertakes a range of assessment services to assist in the resolution of performance concerns about doctors, dentists and pharmacists. Here we present the findings of 102 [clinical performance assessments](#)<sup>1</sup> during financial years 2013/14 to 2019/20 to share important insights from this core area of our work.

The key points include:

- The assessors reach an overarching conclusion as to whether the practitioner is practising at the expected level for their grade and specialty.
- In our analysis, we found that 63% of assessed practitioners were not practising at the expected level while 37% were at the expected level.
- Our analysis also shows that those who first qualified outside of the UK are more frequently found to be performing at the expected level compared to their colleagues who qualified in the UK, for both white and ethnic minority groups.

#### What are clinical performance assessments and what can they tell you?

The purpose of a clinical performance assessment is to provide:

- an independent view on the clinical performance of the practitioner; and
- information to assist the employing or contracting organisation in decisions about the next steps in their management of the case.

Our clinical performance assessments are undertaken by at least two independent assessors, each working in the specialty concerned, who have completed specialist training in our clinical assessment methods. This assessment is our most comprehensive intervention, comprising an in-depth review of a randomly selected sample of clinical records, direct observation of practice and case-based assessment.

The assessors reach an overarching conclusion as to whether the practitioner is practising at the expected level for their grade and specialty. In order to do this, each practitioner is assessed against a number of domains after an in-depth review of the evidence gathered throughout the assessment process. The domains are broadly mapped against the General Medical Council's [Good medical practice](#) and/or other professional relevant standards. Each domain is given an overall judgement of 'satisfactory', 'inconsistent' or 'poor' after the assessors have reviewed the evidence

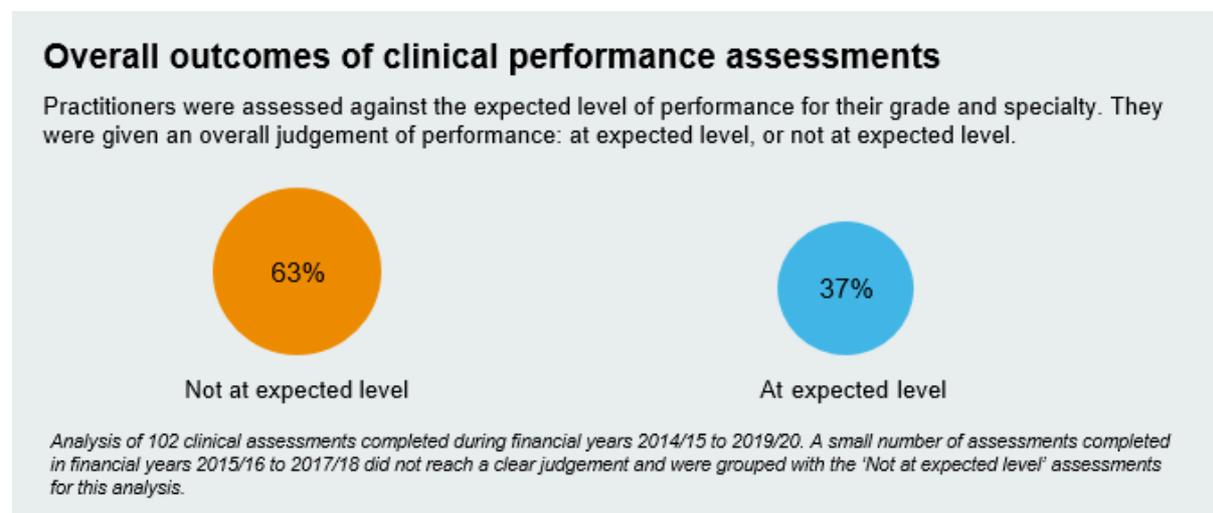
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<sup>1</sup> including our older model of full performance assessments

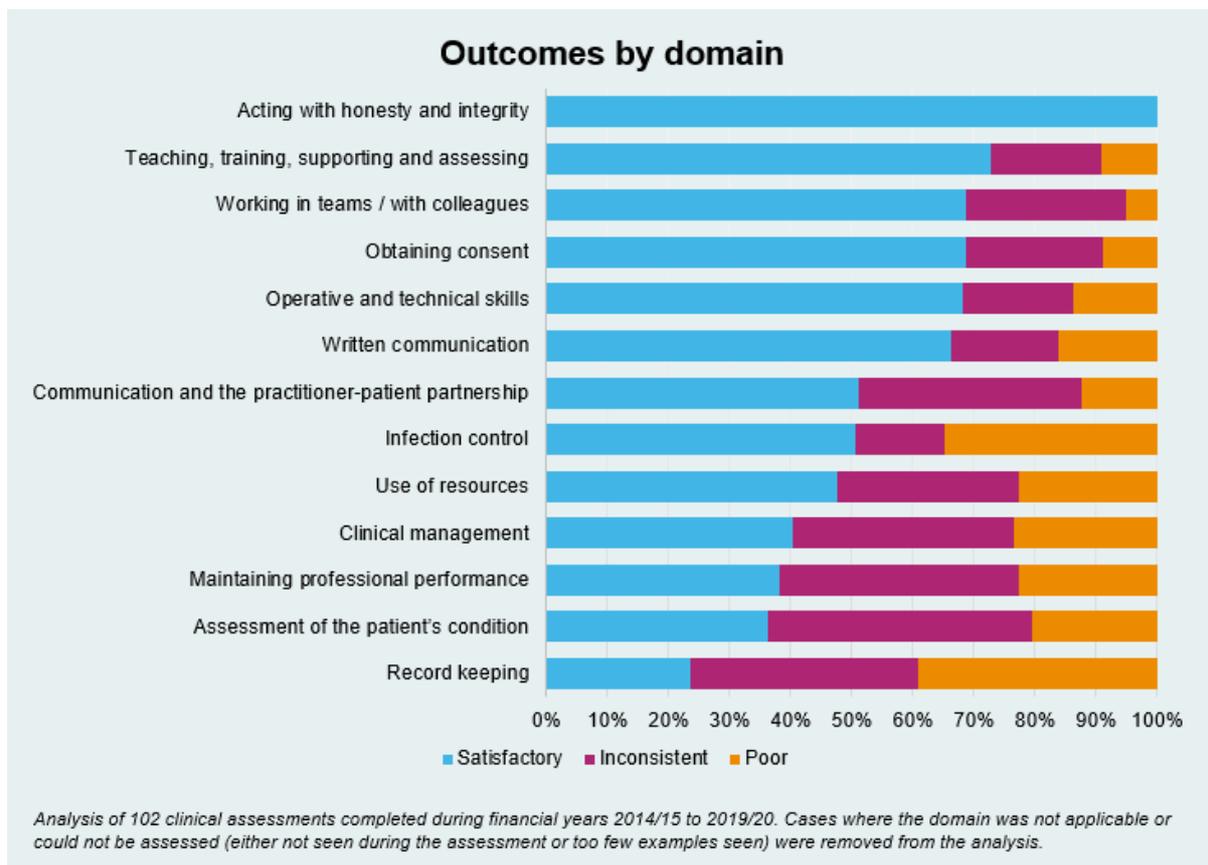
throughout the assessment. After an assessment has been completed, the Practitioner Performance Advice adviser assigned to the case will discuss the results with the healthcare organisation and practitioner to support the parties involved to move the case forward – and, if appropriate, we will offer to prepare a draft action plan to support [remediation through our Professional Support and Remediation service](#).

## What did we find in our analysis?

### Overall outcomes



## Outcomes by domain



In our analysis, we found high rates of poor or inconsistent performance against several key domains, including:

- record keeping (76% of the practitioners were assessed as performing poorly or inconsistently)
- assessment of the patient's condition (64%)
- maintaining professional performance (62%)
- clinical management (60%)
- use of resources (52%)
- infection control (49%)
- communication and the patient-practitioner partnership (49%).

### Demographics: characteristics of practitioners undergoing a clinical performance assessment

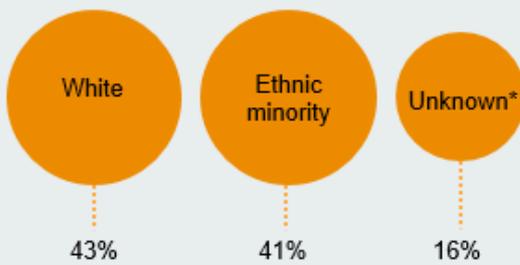
The demographics of this smaller group of practitioners who have undergone a clinical performance assessment in the main reflects the demographics of the larger group who have been the subject of a Practitioner Performance Advice case in a

broadly similar time period (financial years 2015/16 to 2019/20). A key difference is that, while in our work at large approximately 20% of our cases involve practitioners working in primary care, this figure rises to 44% when looking at those who have undergone a clinical performance assessment. It is also noteworthy that 59% of primary care advice cases involved a clinical concern compared to 43% in respect of practitioners working in a secondary care setting.

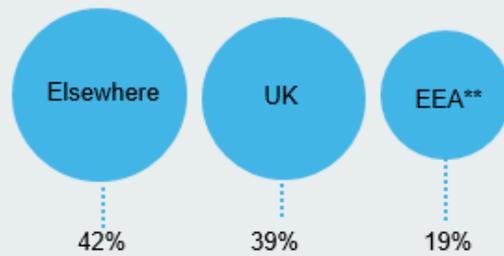
We are currently exploring the extent to which certain groups of practitioners may be over- or under-represented in our work in comparison to the NHS workforce that our services cover.

## Demographics of healthcare practitioners undergoing clinical performance assessments

### Ethnicity

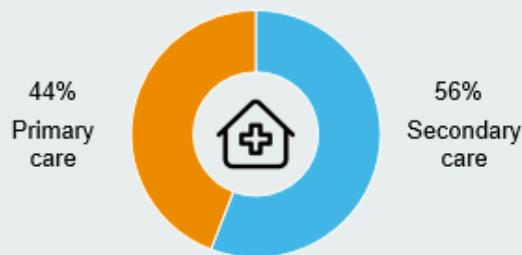


### Place of initial qualification

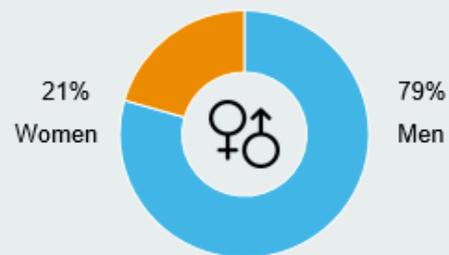


The largest ethnic minority group was Asian or Asian British (26% of assessed practitioners).

### Sector



### Gender



### Specialty

**34%** of assessed practitioners worked in **general medical practice**. This was the largest group, followed by surgeons (13%).

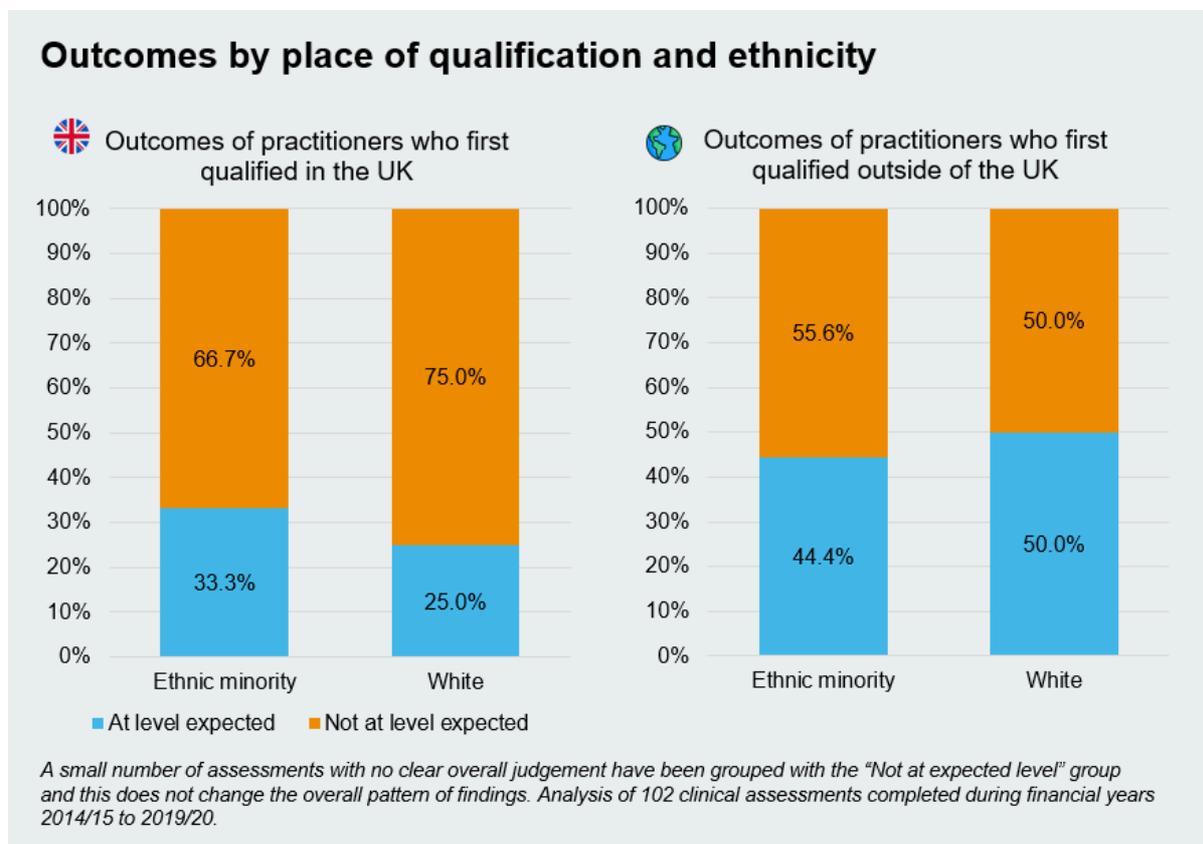
### Age

**72%** of assessed practitioners were **40-59 years old**.

\* In some cases, the data was not disclosed to Practitioner Performance Advice. We are working to improve the completeness of our data.

\*\* European Economic Area

## Outcomes by place of qualification and ethnicity



Our analysis of clinical performance assessments outcomes data shows that those who first qualified outside of the UK are more frequently found to be performing at the level expected compared to their colleagues who qualified in the UK. This is true for both the white and ethnic minority groups. The clinical assessment process is designed to ensure a fair and independent process that involves multiple assessors and is underpinned by a range of quality assurance mechanisms. As described in our publication [Being fair](#), equity and fairness are key to helping to embed a restorative just learning culture. We will continue to monitor the observations as they relate to place of qualification and explore them further with key stakeholders.

### Want to find out more about our clinical assessments?

All services provided by Practitioner Performance Advice, including our assessment services, are directed towards supporting the early identification, and fair and effective management and resolution of concerns in relation to the performance of doctors, dentists and pharmacists. In all cases, patient safety and public protection are our paramount concerns.

Further information about our assessments and how to request them are available on [our website](#).

Our *Insights* publications share analysis and research which draw on our in-depth experience providing expert, impartial advice and interventions to healthcare organisations. By sharing these insights, we aim to support the healthcare system to better understand, manage and resolve concerns about doctors, dentists or pharmacists. You can find all past reports [here](#).

If you are interested in hearing more about our research and insights programme, please get in touch with us at [Advice.ResearchAndEvaluation@resolution.nhs.uk](mailto:Advice.ResearchAndEvaluation@resolution.nhs.uk).

If you'd like to learn more about our work and the services we offer, please visit our dedicated [Practitioner Performance Advice webpages](#). Our Education service offers [training courses](#) to provide healthcare organisations with the knowledge and skills to identify and manage performance concerns locally.