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Responsible Officer's Standard Operating Procedure

Arranging and participating in video appraisals

Pathology Delivery Board and Department of Justice, Northern Ireland

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See the [version control](#) section at the end of the document for changes that were made.

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Approved By: Dr Hamilton, Responsible Officer of the Pathology Delivery Board and
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Next Review Date: One year from last amendment

Audience: Home Office registered forensic pathologists, State Pathologists for Northern Ireland, and those persons within the Pathology Delivery Board's independent responsible officer's appraisal scheme.

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Introduction

Since 2020, the use of video conferencing has expanded and become normality for people in all spheres of business, commerce, and medical practice; for meetings, conferences and training. The advantages to the use of video conferencing include a reduction in the need for travel, saving both travel costs and time.

This standard operating procedure was compiled following several trial video appraisals and a review of the practice and experiences of the appraisers.

Purpose

To provide a standard operating procedure for carrying out and participating in, video conference appraisals between a designated appraiser (known as 'appraiser' hereon in) and a doctor associated with the designated bodies of the Home Office Pathology Delivery Board (PDB) and Department of Justice, Northern Ireland.

Scope

This standard operating procedure applies to all doctors whose designated bodies are the Home Office Pathology Delivery Board (PDB), or the Department of Justice, Northern Ireland, and have decided to carry out a video appraisal.

It should be noted that **face-to-face appraisals should take place** for the following:

- New members of the Home Office Register of Forensic Pathologists, or the State Pathologist's Department, Northern Ireland.
- Members who have a different appraiser from last year.

Associated documents

This standard operating procedure should be read in conjunction with:

1. AG-001 Guidance on annual appraisal
2. The Pathology Delivery Board's [Privacy Information Notice](#).
3. Department of Justice, Northern Ireland, [Privacy Policy](#).

The following forms will be used when compiling your appraisal documentation, including:

4. AF-001 Appraisal form
5. AF-002 Reflective practice form
6. AF-003 Appraisal feedback form
7. AF-004 Significant event form
8. AF-005 Complaint form
9. AF-006 Service user feedback form
10. AF-009 Work leisure balance assessment form
11. AF-010 Practice self-assessment tool.

Guidance documents are also available as follows:

12. AG-001 Guidance on annual appraisal
13. AG-002 Exemplified appraisal form guidance
14. AG-003 Service user feedback guidance

15. AG-004 Guidance on welfare advice and support.

All forms and guidance documents listed above can be found at:

<https://www.gov.uk/government/publications/annual-appraisal-for-forensic-pathologists>

Equipment and supplies

1. An electronic device capable of receiving video calls.
2. A separate laptop, to view documents online whilst engaging in a video call on other device, if desired (although it is helpful to have two devices).
3. Video conferencing software, such as Microsoft Teams, Webex WhatsApp, FaceTime, Facebook Messenger video, Zoom and Skype, all of which have end-to-end encryption. Always ensure that you have the latest application update, installed on your device before use.
4. A stable and secure broadband connection, whether wired or wireless (but not on a public wireless network).
5. All completed appraisal forms, either electronically or paper copies for appraiser and doctor.
6. All supporting evidence, either electronic or paper copies for appraiser and doctor.
7. A secure network email address such as CJSM or doctors.net.

Responsibilities

Responsibility for different stages of the appraisal meeting is split between:

- The doctor whose appraisal is taking place via video conferencing, and,
- The appraiser carrying out the appraisal.

Handling instructions

This standard operating procedure is a document written and controlled by the Home Office Forensic Pathology Unit on behalf of the Pathology Delivery Board (PDB) and Department of Justice, Northern Ireland. No changes should be made to this document by anyone other than Home Office or Department of Justice officials. For all suggestions for amendments to this document, please contact: pathology@homeoffice.gov.uk.

All completed appraisal documentation and supporting information should be treated as 'Official: Sensitive' or 'Private and confidential' by the appraiser as the information within the documentation contains personal data, subject to confidentiality requirements under

the General Data Protection Regulation. Do not circulate this information further without prior approval from the data subject (the doctor whose appraisal meeting is taking place). Further information and guidance for how the appraiser should handle personal data can be read in the Pathology Delivery Board's Privacy Information Notice, available at the following link:

https://assets.publishing.service.gov.uk/media/5f082732e90e0712c26c1ec7/PDB_Privacy_Information_Notice.pdf.

For information about how the Department of Justice, Northern Ireland protects and uses information held about the State Pathologist's Department, please read the Department's privacy policy, available here: <https://www.justice-ni.gov.uk/publications/doj-privacy-notice>.

Procedure

Preparation

1. It is essential, that in the first instance, the doctor is offered a face-to-face meeting and as noted in the [Scope](#) New members or where you have a different appraiser from the previous year, these appraisals should be conducted as a face-to-face meeting. It is understandable that there may be mitigating circumstance where this isn't possible, but in these circumstances, please consult with your responsible officer to keep them informed.
2. Both the appraiser and appraisee should agree a suitable date and time for the appraisal to take place, whilst choosing a suitable location that is free of distractions.
3. Preparation is key. Appraisers must ensure that they are fully equipped and have all the doctor's completed appraisal forms and supporting documents before the meeting takes place. The appraisee should ensure that all documentation has been securely emailed or posted to the appraiser no later than two weeks before the appraisal is due to take place.
4. Both the appraiser and appraisee should agree on the software or application to use for video calling and test this out beforehand.

The meeting

5. The decision as to whether to record the appraisal meeting is a matter for the appraisee and appraiser. However, recording of the meeting should never be carried out covertly, without the knowledge of the participants of the meeting. The guidance for annual appraisal: AG-001, states at paragraph 5.5, that the appraiser should not keep a copy of the appraisees appraisal documentation. Therefore, it may be considered by the appraiser, not to be appropriate for the meeting to be recorded.
6. Video appraisals should not take place in public areas or over public WIFI where conversations may be overheard by the public.

7. The appraiser should make written or electronic notes during the appraisal meeting so that the flow of the meeting is not disturbed and the sign off process can be completed at the end of the meeting.

After the meeting

8. Once the meeting has taken place the draft appraisal documents should be typed by the appraiser and emailed to appraisee, preferably using their secure network email address, in order that they can be checked and agreed by the doctor being appraised.
9. The appraisee should complete an appraisal feedback form (AF-003) and return it via email to the clinical lead appraiser.
10. Once the appraisal documents have been agreed by the appraiser and appraisee, the appraiser should email the document using the CJSM email system to the responsible officer within four weeks of the appraisal taking place.
11. The appraiser is then requested to complete the Appraisal Summary PDP Audit Form (AF-007) and return this to clinical lead appraiser.

Definitions

Appraisee	The doctor undertaking annual appraisal.
Clinical Lead Appraiser	The lead appraiser of the cohort of designated appraisers. The clinical lead appraiser is an appraiser who carries out appraisals on doctors, in addition to providing support to the responsible officer.
Designated appraiser	A doctor who has participated meaningfully in an appraiser training day, will facilitate the appraisal process, and will be responsible for signing off the appraisal form. Depending upon the appraisee's scope of work, there may be more than one appraiser. For example, where a forensic pathologist has an academic role, there may be a university appraiser.
Designated body	The organisation with which appraisee has a prescribed connection.
Personal data	"Any information relating to an identified or identifiable living individual (subject to subsection (14)(c))." (Data Protection Act 2018 c. 12, Part 1, Section 3 (2))
Prescribed connection	This is the connection a doctor has to a designated body (for revalidation purposes) and is based on a number of factors; including, but not limited to, the organisation that you have been employed under, or organisations to which you have a membership. See web link: https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation/my-db-tool , for more information.

Responsible officer	The responsible officer has specific responsibilities relating to the evaluation of the fitness to practise of doctors connected with designated bodies. A key responsibility is to recommend to the GMC whether or not a doctor should be revalidated.
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Templates

There are no templates associated with this standard operating procedure.

Contacts

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Clinical Lead Appraiser

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END OF DOCUMENT

Version control

Version Number	Date Approved	Approved By	Brief Description
4	16/06/2025	Dr S. Hamilton	Updated 'Equipment and supplies' at point 3 concerning video conferencing software, and clinical lead appraiser contact information.
3	01/07/2024	Dr S. Hamilton	Placed SOP onto Home Office branding which incorporates new sections such as 'Responsibilities', 'Handling instructions', 'Definitions' and 'Contacts'.
2.1	01/09/2023	Prof G. Ruddy	Update to 'Associated Documents' list - Addition of new forms: AF-009 and AF-010; removal of AF-007 and AG-002. Update to 'Special notes' to remove "where ever possible". Reordering of the list of video conferencing software within 'Equipment and materials' with preferable first and least preferable, last. Insertion of point (5) about recording the meeting.
2.0	12/08/2022	Prof G. Ruddy	Update to 'Associated Documents' list – Addition of new 'AF-006 Service user feedback form'; addition of 'AF-007 Appraisal Summary Audit form'; addition of 'AG-002: Guidance for description of practice form' [this is an error]; addition of 'new 'AG-003: Service user feedback guidance'. Addition of point (9) to 'Protocol' section. Change of clinical lead appraiser from Dr Nat Cary to Dr Stuart Hamilton.
1.1	28/07/2020	Prof G. Ruddy	Update to 'Associated Documents' list - removal of 'AF-002: Description of practice form', replaced with 'AF-002: Reflective practice form'; removal of 'AF-006: Checklist for appraisal form'; removal of 'AF-007 Appraisal Summary Audit form'; removal of 'AG-002: Guidance for description of practice form' replaced with 'AG-002: Exemplified appraisal form'; removal of AG-003: Annual appraisal meeting agenda template.
1.0	25/03/2020	Prof G. Ruddy	First compiled document.