



## Approved Practice Setting – procedure

The Approved Practice Setting (APS) scheme is established by the General Medical Council. It requires all UK and international medical graduates who are new to full registration, and all those applying for restoration after a significant break in practice, to work with appropriate supervision and appraisal arrangements (or assessments). These arrangements support a doctor's practice and avoid the risk of professional isolation at a critical point in a doctor's career.

APS are UK organisations that have systems in place to:

- provide doctors with appropriate supervision and regular appraisal
- identify and act upon concerns about a doctor's fitness to practice
- support the provision of relevant training and continuing professional development for doctors
- provide regulatory assurance

Doctors will be meeting the APS requirement if they hold and maintain their connection to the FPH as their designated body. This does not mean that a doctor is restricted to working physically only in one organisation. They can work in any organisation if they hold and maintain a connection to a designated body and the educational supervisor / Responsible Officer (RO) agrees that they can undertake this work.

The prescribed connection to FPH for revalidation and being in an APS means that the doctor is:

- meeting the approved practice setting requirement
- supported and engaging in appraisal and revalidation
- working in an environment that monitors and supports the doctor in delivering quality care, regardless of how or where they practice in the UK

Doctors in an APS who want to practice outside their substantive employment (for example as a locum doctor) may do so, but must ensure their educational supervisor is aware of this and must comply with any reporting requirements set by their RO or their educational supervisor.

### What does this mean in practice?

To be successful the doctor subject to the APS process must engage fully with it and with the annual appraisal / revalidation process.

Because the FPH is not the doctor's employer, the doctor must identify an educational supervisor, approved by the FPH RO, within their employing organisation.

The educational supervisor must be a licensed doctor and must agree in writing to the FPH RO to taking on the role and adhering to this procedure.

The educational supervisor must ensure that the doctor practices safely and competently. To support this process the educational supervisor is expected to meet with the APS doctor formally every three months. The meetings should include reviewing progress and setting objectives (which may be based on, or related to, their appraisal PDP). A brief summary of each meeting, including

the issues discussed, progress since the last meeting and future objectives must be forwarded to the RO.

Whilst it is entirely appropriate that an APS doctor is set challenging objectives, they must be careful not to undertake work that is outside their competence, unless directly supervised.

The quarterly meetings must include:

- Reflection on the APS doctor's practice since the last meeting
- Progress in relation to objectives set / Personal Development Plan (PDP)
- Setting new objectives for the next period
- Addressing any concerns that the APS doctor, educational Supervisor or RO may have

### **How to record the APS in your annual appraisal and revalidation portfolio**

A brief record of the meeting should be written by the educational supervisor and sent to the RO / lead appraiser. The educational supervisor must alert the RO to any concerns that they have about the doctor's practice.

The meeting records, with reflective notes, should be included in the APS doctor's supporting information for their subsequent revalidation ready appraisal.

### **Timeframe**

After the first year of APS, the frequency of meetings may be reviewed by the RO and potentially changed to every four or six months. Thereafter the frequency of the meetings may be reviewed from time to time by the RO.

The APS continues until the doctor's revalidation. In addition to the requirements of the APS the doctor must meet the usual requirements for revalidation (quality assurance, MSF etc.).

### **Review**

This policy will be reviewed every three years by the Workforce Standing Committee.

April 2024 – For renewal in April 2027