APPRAISAL & REVALIDATION | WORKBOOK

Appraisal Route and Connection Checklist

A practical companion to Appraisal, Revalidation and the Professional Portfolio.

- ✓ Six task-specific planning stages
- ✓ A worked example and guided writing space
- ✓ Matching accessible webpage and primary sources

Prepared for SAS, locally employed and other UK doctors

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Purpose and boundaries

Use this workbook when starting work, changing employer, adding another role or discovering uncertainty about who oversees your appraisal and revalidation. It helps you prepare questions for the proper team. It cannot determine a prescribed connection from a job title or replace the GMC connection tool.

Use neutral planning notes. Do not record names, GMC numbers, identifiable cases, health details, confidential employer material or private document links here. The website is not an approved appraisal record. Entries in the webpage stay in the open page and are not saved automatically. Store completed downloads securely and transfer appropriate information to your approved system.

Worked example: a fictional planning situation

A doctor moves from a long hospital post to several shorter appointments. The former appraisal login still works, but the doctor does not treat continued access as evidence that the old connection remains correct. They check the current GMC tool, ask the relevant organisations to confirm responsibility, agree how previous appraisal records can be transferred and keep a neutral action list. The connection, the next meeting and access to evidence are three separate matters to resolve.

1. Describe the change

Start with the type of work and the transition. Include concurrent medical roles and periods without an employer. Use neutral role labels here; the actual organisational and personal details belong in your approved records. A role map helps identify the right questions without inviting an unsupported connection decision.

What type of work or employment arrangement has changed?

Which concurrent roles or periods without a post need to be considered?

2. Check the connection

Use the current GMC connection tool and follow its instructions. Confirm the result with the appropriate organisation or the GMC where uncertain. A familiar employer, a preferred appraiser or access to a platform is not enough to establish the connection. Record that confirmation exists without copying private correspondence.

Which official route will you use to confirm the connection?

What remains unclear, and which team will clarify it?

3. Confirm the local system

Ask which appraisal platform and process apply, who arranges the appraiser and what preparation timetable is expected. Hospital SAS and LED doctors should not assume that a GP or formal-training system is the right route. Confirm accessibility adjustments and assistance before the submission becomes urgent.

Which system and administrative arrangements need confirmation?

What access, training or adjustments will you request?

4. Maintain continuity

Before leaving a post, agree appropriate access to your appraisal summary, PDP and supporting information. Follow organisational permission and retention rules. Do not copy clinical records or confidential employer files into a personal archive merely because access may end. A reference and transfer arrangement may be more appropriate.

Which approved records or references need a continuity plan?

Who will arrange secure access or transfer, and what is the next step?

5. If there is no connection

Doctors without a responsible officer or suitable person have additional GMC requirements. These include defined appraiser criteria, annual returns and the revalidation assessment process. Read the current guidance and the actual notices; do not assume that buying an appraisal alone completes the route.

Which additional GMC requirements need checking in your situation?

What official request or practical arrangement needs attention first?

6. Close the uncertainty

Separate confirmed facts from outstanding actions. Keep evidence of the agreed arrangement in the appropriate record and check GMC Online details where required. If responsibility remains disputed, seek clarification promptly. A calendar reminder is helpful only when there is an identified action and route for resolution.

What has been confirmed, without including identifiers?

What remains open, and when will you follow it up?

Review the plan before using it

Check that the notes describe what is known, what remains uncertain and what someone still needs to agree. A completed field does not prove approval, competence or revalidation readiness. Keep official correspondence and actual deadlines separate from illustrative planning dates. Seek appropriate advice where an individual decision or a licence may be affected.

What is the next action, who needs to agree it and when will you review progress?

Sources and related learning

Editorial source review: 9 September 2026. The links below are primary sources; publication dates vary. Current official guidance and approved local arrangements take priority. This is independent education, not a GMC-endorsed form or individual advice.

GMC: connection help tool — UK

GMC: revalidation requirements for doctors — UK

GMC: additional requirements without a connection — UK

HEIW: appraisal and revalidation in Wales — Wales

Medical Appraisal Scotland: SAS doctor resources — Scotland

Return to the Appraisal, Revalidation and Professional Portfolio programme.

Accessible HTML edition: https://sasdoctors.com/resources/worksheets/appraisal-route-connection-checklist