APPRAISAL & REVALIDATION | WORKBOOK

Professional Portfolio Maintenance and Career Guide

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

Create a sustainable evidence system that can support appraisal and career development while preserving the different requirements of each decision. The goal is reliable sources and clear explanation, not a public archive of confidential records.

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 has contributed to an improvement project, taught colleagues and coordinated a service change. For appraisal, they explain what they learned and how practice developed. For a leadership application, they describe responsibility, judgement, collaboration and demonstrable impact. For a registration route, they check the current required standards and verification rules. The source may overlap, but a summary suitable for one purpose is not automatically sufficient for another.

1. Separate purposes

List the decisions your evidence may support: annual appraisal, development review, a role application, SAS progression or specialist registration. Identify the question and standard for each. Do not treat a successful appraisal as proof that appointment or registration requirements have been met.

Which purposes are relevant to your current plans?

What separate requirements must be checked for each purpose?

2. Keep sources and summaries distinct

Preserve an authorised source record and a neutral index. Prepare purpose-specific explanations without altering the underlying facts. Track versions and dates so that an application narrative does not gradually become detached from the evidence it describes.

How will sources be referenced and versions controlled?

What explanation needs adapting for a different purpose?

3. Describe contribution honestly

State the context, your responsibility, actions, collaboration and the outcome that can be supported. Separate an output from its effect. A project title or senior grade does not explain what you personally did, and an uncertain outcome should be described with its limitations.

What did you contribute, and what did others contribute?

What output and impact can the available evidence support?

4. Include the whole medical role

Teaching, supervision, leadership, research and governance may be important parts of the scope. Identify relevant feedback and review without treating these roles as decorative extras. Protect learner and colleague information and check permission before reusing internal material.

Which non-clinical medical roles need clearer evidence?

What permission, confidentiality or scope issue must be checked?

5. Use a small maintenance routine

Choose a manageable periodic review of the scope map, evidence index and PDP. Record learning while it can still be recalled accurately. Secure access, meaningful dates and a usable index matter more than elaborate formatting. Retain only material you are authorised to hold.

What routine will keep the index and development actions current?

What evidence access or retention issue needs attention?

6. Choose a realistic next step

Career development may mean deeper practice, teaching, leadership, a different role or a more sustainable job. Remaining in a senior SAS career is a valid choice. Link the next step to evidence, support and workload rather than assuming that progression must always mean a change of grade.

What next development step fits your own goals and current role?

What support, evidence and review will make that step realistic?

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: supporting information and declarations — UK

GMC: continuing professional development — UK

GMC: quality improvement activity — UK

GMC and partners: reflective practice principles — UK

GMC: revalidation requirements for doctors — UK

Return to the Appraisal, Revalidation and Professional Portfolio programme.

Accessible HTML edition: https://sasdoctors.com/resources/worksheets/professional-portfolio-maintenance-guide