Instructions for administering GMC colleague and patient questionnaires

The following instructions relate to the GMC’s colleague and patient questionnaires. If you are using a different questionnaire to collect feedback, you should use the instructions provided with that questionnaire.

This guidance is aimed at those responsible for administering GMC questionnaires and those handling and distributing GMC questionnaire in their organisations. However, individual doctors, appraisers and Responsible Officers may also be interested in reading these instructions.

If you are an appraiser, or are responsible for feeding back the questionnaire results, detailed background information is available in Information for appraisers: Interpreting and handling multisource feedback results.

This guidance is based on how the GMC questionnaires were administered during two phases of piloting and research that involved over 1450 doctors, 44000 patients and 21000 colleagues.

Before you begin

You need to ensure that:

- All information and responses will be held in line with the Data Protection Act 1998.
- Doctors will not see any individual responses from colleagues or patients.
- Feedback to doctors must be based on the answers from everyone taking part. No respondents should be identifiable in any way.
- You make the questionnaires available in alternative formats such as large print, when requested, to meet the needs of respondents (in line with your legal responsibilities under the Equality Act 2010).

Distribution

Patient questionnaire

The GMC questionnaire is designed to be administered to 45 consecutive patients (or carers) as a post-consultation or ‘exit’ survey. It should take patients about five minutes to complete.

To gain a good overall perception of performance through the eyes of their patients, doctors should aim to collect a minimum 34 completed questionnaires from their patients. Further information about the testing and piloting of the questionnaires is available on the GMC website.

In clinical settings, the survey pack can be distributed by reception staff or other clinical staff. Patients should be encouraged wherever possible to complete their questionnaire in the waiting area, immediately after their appointment with the doctor, and return it in a sealed envelope to a deposit box in the clinic.

Wherever possible, the questionnaires should not be distributed directly by the doctor. However, in some settings, the doctor may need to approach patients and distribute the survey packs themselves at the end of the consultation.

If a deposit box is not feasible, patients may take the questionnaire home and post their completed questionnaire to the survey organisation in a reply-paid envelope. However, this may affect the number of completed questionnaires returned.

If the patient is a young child (under 12) or lacks mental capacity, a carer (or ‘proxy’) can complete it on the patient’s behalf. However, a ‘proxy’ should not be used as a default for patients who require questionnaires in an alternative format. Reasonable adjustments should be made for patients requiring questionnaires in alternative formats in line with legal requirements set out under the Equality Act 2010.
**Selection of patients**
You do not need to select particular patients to complete the feedback questionnaire. The questionnaire should be provided to 45 consecutive patients to ensure that a full and unbiased representation of your patients is reflected in the feedback sample.

However, there may be instances where you judge that it is not appropriate to seek feedback from a particular patient. Doctors and staff need to exercise professional judgement about the appropriateness of requesting feedback from a patient, while ensuring that no bias is occurring in the patient sample.

**Who is a patient?**
For the majority of doctors in clinical practice identifying patients who can provide feedback will not be a problem. However, some doctors do not see patients and will wonder whether they need to seek feedback from others.

You should encourage these doctors to think very broadly about who in their day to day practice might have something to contribute that will help the doctor demonstrate their skills and provide them with material for reflection at appraisal.

**Colleague questionnaire**
At the start of the process, the doctor will need to nominate 20 colleagues who are able to provide feedback on their professional performance. The nominated sample should be made up of a mixture of medical and non-medical colleagues (10 medical and 10 non-medical if possible). To gain reliable feedback from colleagues, the aim should be to collect a minimum of 15 completed colleague questionnaires.

Data collection for the colleague survey should be managed by an independent survey organisation. Doctors provide the survey organisation with a list of their nominated colleagues, and their e-mail or postal addresses.

Each colleague on the list is then approached by the survey organisation and invited to complete an online questionnaire using a secure process. A paper version of the questionnaire can be made available on request.

**Selection of colleagues**
**When selecting medical colleagues, we suggest choosing:**
- At least one colleague from your specialty
- At least one colleague to whom you regularly refer patients, where applicable
- At least one colleague with whom you regularly discuss patients or who refers patients to you
- For surgical specialists, at least one anaesthetist with whom you frequently work
- For anaesthetists, at least one surgical specialist with whom you frequently work
- Your line manager, if you have one

**General practitioners should also try to include:**
- At least one colleague at your practice, or if you are a sole practitioner, the colleague with whom you most frequently communicate on clinical issues
- A junior peer
- A senior peer (such as a senior general practitioner colleague or consultant)
- At least one nurse with whom you frequently work

**Hospital-based doctors should also try to include:**
- The ward manager and a nurse (or nurses) from the ward you most frequently work in
- A staff nurse from the Outpatients department
- For clinicians undertaking procedures, at least one theatre nurse with whom you frequently work

**When selecting non-medical colleagues, you might consider**
- A pharmacist
- Administrative staff such as reception or secretarial staff working within your team
- Other health professionals with whom you work (such as a physiotherapist, occupational therapist, community mental health nurse or laboratory technical staff)
Self-assessment questionnaire
Each doctor should complete a self-assessment questionnaire. Most survey organisations will make this available online, and reminders will be sent to non-responding doctors. A paper version can be made available on request.

Collation
Responses must be collated independently of the doctor, appraiser and Responsible Officer.

Feedback
Doctors should receive feedback from an individual with experience in providing feedback.

The Feedback report
A personalised summary report should be sent to each individual doctor. All information must be anonymised and the doctor must not be able to identify respondents from any information provided.

This report should summarise key information such as:

- Frequency and distribution of responses across each question
- Free text comments
- Comparisons between self assessment responses and the feedback from colleagues and patients.
- Background information about the samples of patients and colleagues who took part in the survey, where this is possible without identifying any participants.

Nominating a supporting medical colleague
At the beginning of the survey process, doctors might like to nominate a ‘supporting medical colleague’ with whom they can informally discuss their report shortly after its receipt.

Understanding bias and limitations in the results
The GMC questionnaires have been subject to detailed research which has enabled us to identify particular biases and limitations.

Those responsible for appraising doctors need to be aware of the limitations of, or potential sources of bias in the feedback obtained using the GMC colleague and patient questionnaires. As with any questionnaire, these potential sources of biases need to be taken into account when interpreting and providing feedback.

Examples of limitations and biases are set out below. More detailed information is available in the Information for appraisers.

- Piloting has found that feedback from both colleagues and patients is overwhelmingly positive. There is a bias towards positive assessments.
- Results are less reliable where there are less than 34 completed patient questionnaires and 15 completed colleague questionnaires.
- Piloting has suggested that some patient characteristics, such as age and ethnicity, can influence the ratings that doctors receive on individual questions. If the doctor has a high proportion of patients in these groups in their survey sample, it could affect the ratings they have obtained. Further information and characteristics of ‘possible importance’ are available in the Information for appraisers.
- Piloting has also suggested that some colleague characteristics can influence ratings. Further information and characteristics of ‘possible importance’ are available in the Information for appraisers.
- Characteristics of the doctors themselves, such as their role or clinical specialty may also affect a score. Further information is available in the Information for appraisers.
Collecting feedback from colleagues and patients is a formative activity. Doctors will need to review the feedback and what it says about their practice and performance. The feedback should highlight strengths and identify areas for further improvement.

Doctors should also review their self-assessment scores against the feedback provided by patients and colleagues to build and encourage insight into their practice. These reflections should be discussed at appraisal.

Any conclusions made about a doctor's practice as a result of feedback will take into account other pieces of supporting information, as well as the wider practice context. Please see our guidance Supporting information for revalidation.

However, if any serious concerns become apparent, these should be pursued through the usual processes in the workplace.
Guidelines for staff who are distributing patient questionnaires on behalf of doctors

Instructions
1. Please ensure that the doctor’s name appears at the top of the questionnaire.
2. Please hand out one questionnaire, information sheet and envelope to each patient.
3. Please offer a questionnaire pack to every patient the doctor is seeing that day.
4. Please hand out all 45 questionnaires.

Suggestions about what to say about the questionnaire
- ‘Your doctor is seeking his/her patient’s views on how well they perform and whether they could improve the way they work. We would like you to fill in the questionnaire after you have seen the doctor today’
- ‘It will only take five minutes’
- ‘Please give your honest views’
- ‘When you have filled it in, please place your completed questionnaire in the envelope, seal it and put it in the deposit box.’

Helpful tips
Wherever possible, invite the patient to take part in the survey when they sign in for their appointment with the doctor. This is easier than attempting to ‘catch’ the patient before they leave the clinic.

Ask the patient to complete the questionnaire after the consultation ON-SITE if possible, rather than taking it home. This helps avoid the possibility of patients forgetting to post back their completed questionnaire.

Have a deposit ‘ballot’ box in reception for patients to return their completed and sealed questionnaires. This will help reassure them that their responses are entirely anonymous.

If the patient is a child (under 12) who is unable to complete the questionnaire please ask an accompanying adult to fill it in on the patient’s behalf.

If the patient has a disability they may ask for assistance in completing the questionnaire, or for the questionnaire to be provided in an alternative format, such as large print, in order to meet their needs. You should try to meet their needs if at all possible.

There may be instances where it is not appropriate to ask a patient for feedback, for example a patient in a very distressed state. Please use your professional judgement in such cases.

Important The doctor MUST NOT be given access to individual completed questionnaires as the anonymity of the patients could be compromised.
Guidelines for doctors who are distributing their own patient questionnaires

Instructions
1. Please ensure that your name appears at the top of each questionnaire.
2. Please hand out one questionnaire, information sheet and envelope to each patient.
3. Please offer a questionnaire pack to every patient who consults you during the survey period.
4. Please hand out all 45 questionnaires.

Suggestions about what to say about the questionnaire
- ‘I am seeking my patients’ views on what they feel about my professional behaviour and practice, and whether they think I could improve the way I work. I would like you to fill in this questionnaire after our consultation today’
- ‘It will take about five minutes to fill it in’
- ‘Please give your honest views’
- ‘When you have filled it in, please place your questionnaire in the envelope, seal it up and put it in the deposit box provided or post it back directly to the survey organisation’

Helpful tips
Invite the patient to take part in the survey at the end of their consultation with you. If they agree to take part in the survey, hand them a questionnaire pack to complete in the waiting area or other suitable area.

Ask the patient to read the instructions and complete the questionnaire as soon as possible, so that the consultation is still fresh in their mind – ideally ON-SITE and immediately after the consultation.

If the patient is a child (under 12) who is unable to complete the questionnaire, please ask an accompanying adult to fill it in on the patient’s behalf.

If the patient has a disability, they may ask for assistance to complete the questionnaire or for the questionnaire to be provided in an alternative format, such as large print. You should try to meet their needs if at all possible.

Please ask the patient to post their completed and sealed questionnaire in the deposit box provided or post it directly to your survey company. If any questionnaires are returned to you in error, please forward them (unopened) to your survey company.

There may be instances where it is not appropriate to ask a patient for feedback, for example a patient in a very distressed state. Please use your professional judgement in such cases.

Important You MUST NOT have sight of individual completed questionnaires as the anonymity of the patients could be compromised.
Information for patients and carers

Thank you for agreeing to fill in a questionnaire. The clinic receptionist, nurse or doctor who gave you the questionnaire will explain what you need to do next. If you would like more information about the survey and how to fill in and return the questionnaire, please read this leaflet.

Your doctor would like to know how well you think they have performed today and whether you think they could improve the way they work. The results of the survey will be used to improve the way your doctor interacts with patients and the healthcare you receive.

How to fill in the questionnaire

- It should take no more than 5 minutes to fill in the questionnaire.
- Please do not write your name on the questionnaire.
- Please fill it in after you have seen the doctor and base your answers on the appointment you have had today.
- If you are a carer who has been invited to fill in the questionnaire on behalf of a patient, please answer Questions 2-12 from the patient’s point of view.
- The doctor will not see your answers, so please give your honest views.
- Please ask the reception or clinical staff if you require the questionnaire in an alternative format, for example, large print.

How to return the questionnaire

- Please fill in the questionnaire as soon as possible after you see the doctor, so that the consultation is still fresh in your mind. Ideally this should be done before you leave the hospital department or surgery/clinic waiting area.
- Once you have answered all the items, please put the questionnaire inside the envelope provided, seal up the envelope and place it in the deposit box in the waiting area or hand it back to the clinic receptionist or nurse.
- If you are unable to stay in the waiting area to complete the questionnaire after your appointment today, you can fill it in at home and then post it back to the survey organisation in the envelope provided.

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