

Briefing note 3 – Annex A

Generic and demographic final questionnaire

The following pages contain the final questionnaire for generic and demographic questions for the 2026 National Training Survey.

- Each row represents an individual question (or the text on the page).
- The first column shows the question code.
- Branching is shown in the final column.
- Survey indicators are marked with an asterisk.

Question number	Question	Answers	Indicator / standalone	Branching
	<p>The survey will begin on the next page and is made up of the following sections:</p> <p>Main section: Questions about your current post. Estimated time for completion: 10 minutes</p> <p>Academic section: If you are an academic trainee there are some questions about your experiences as an academic. Estimated time for completion: 5 minutes</p> <p>Programme section: Questions about your programme (Foundation, Core Training or Specialty Training). A small number of programmes have no questions in this section. Estimated time for completion: Between 1 and 5 minutes</p> <p>Closing section An opportunity for you to raise concerns about bullying and undermining and/or patient safety. Estimated time for completion: 2 minutes For most people the total time for completion will be between 15 and 20 minutes.</p>			

Thank you for completing the questions about your working arrangements. Click next to move to the next section.

Questions about your post. Please answer all questions for the post you were undertaking on 24 March 2026.

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ157	To what extent do you agree or disagree with the following statement? I got all the information I needed about my workplace when I started in this post.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Induction*	
GENHQ131	I was given enough notice about my rota in advance of starting my current post.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Induction*	
GENHQ03	Did someone explain your role and responsibilities in your unit or department at the start of this post?	Yes No Not sure	Induction*	
GENHQ158	Please rate the quality of the induction you received for this post.	Very good Good Neither good nor poor Poor Very poor Not applicable	Induction*	
GENHQ171	Have you agreed educational objectives with your named supervisor for this post?	Yes Not yet, but this will happen No, and this is unlikely to happen Don't know Not applicable (I don't have a named supervisor)	Induction*	
GENHQ172	In your current post, do you have a training/learning agreement with your educational supervisor which sets out your respective responsibilities?	Yes Not yet, but I will No, and I'm unlikely to Don't know Not applicable (I don't have a named supervisor)	Educational* supervision	
GENHQ159	To what extent do you agree or disagree with the following statement? If I had any concerns in this post (personal or educational) I would know who to approach to talk to in confidence.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Educational* supervision	
GENHQ155	To what extent do you agree or disagree with the following statement? My educational supervisor is easily accessible should I need to contact them.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable (I don't have an educational supervisor)	Educational* supervision	
GENHQ156	To what extent do you agree or disagree with the following statement? The level of contact from my educational supervisor is appropriate for my training needs.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable (I don't have an educational supervisor)	Educational* supervision	
GENHQ160	Please rate the quality of teaching (informal and bedside teaching as well as formal and organised sessions) in this post.	Very good Good Neither good nor poor Poor Very poor	Overall satisfaction*	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ11	Local teaching takes place in the workplace. It includes organised, teaching sessions at departmental level as well as more informal sessions such as feedback from senior colleagues and bedside teaching. How would you rate the quality of the local/departmental teaching for this post?	Very good Good Neither good nor poor Poor Very poor N/A - I haven't attended any local/departmental teaching sessions yet	Local teaching*	
GENHQ13	When attending these local/departmental sessions, in this post, how often did you have to leave a teaching session to answer a clinical call?	Never, it was protected time Never, but it was not specifically protected time Some sessions Once every session Multiple times each session N/A - I haven't attended any local/departmental teaching sessions yet	Local teaching*	
GENHQ16	In this post, is specialty-specific teaching provided on a deanery or NHSE regional team/regional/school wide basis?	Yes - all of it Yes - most of it No Not applicable - none have taken place yet	Regional teaching*	and 'Not applicable – none have taken place yet' branches to GENHQ173.
GENHQ18	Were you able to attend these whilst in this post? (note: this question refers to the previous question about "deanery or NHSE regional team/regional/school specialty-specific teaching")	Yes, every time Yes, most of the time Yes, some of the time No	Standalone	
GENHQ19	How would you rate the quality of this deanery or NHSE regional team/regional/school specialty-specific teaching for this post?	Very good Good Neither good nor poor Poor Very poor N/A - I haven't attended any specialty specific teaching	Regional teaching*	
GENHQ173	To what extent do you agree or disagree with the following statement? I have enough protected time to attend all the local/departmental teaching I need to in this post.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable (no local/departmental teaching)	Local teaching*	
GENHQ174	To what extent do you agree or disagree with the following statement? I have enough protected time to attend all the regional/deanery/NHSE regional team led teaching I need to in this post.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable (no regional/deanery/NHSE regional team led learning)	Regional teaching*	
GENHQ136	To what extent do you agree or disagree with the following statement? I have enough protected time to complete all the mandatory training requirements of this post.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Standalone	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ161	In this post, please rate the encouragement you receive to take study leave?	Very good Good Neither good nor poor Poor Very poor	Study leave*	
GENHQ53	In this post, did you have difficulty obtaining study leave for any of the following reasons? (Please tick all the options that apply)	No difficulty Yes - fixed leave pattern Yes - other difficulties due to local rota policies Yes - failure to find prospective cover Yes - active discouragement from seniors Yes - leave refused as reason deemed educationally inappropriate/unhelpful Yes - administrative difficulties	Study leave*	
GENHQ178	In this post, how often (if at all) do you receive informal feedback from senior colleagues about your performance?	Daily Weekly Monthly Less than once a month Never	Feedback*	
GENHQ179	Have you received feedback in a formal meeting with your educational supervisor about your progress in this post?	Yes, and it was useful Yes, but it wasn't useful No, but this will happen No, but it wasn't necessary No, but I would like to Not applicable (I don't have an educational supervisor)	Feedback*	
GENHQ180	Have you had a formal assessment of your performance in this post?	Yes, and it was useful Yes, but it wasn't useful No, but this will happen No, but it wasn't necessary No, but I would like to	Feedback*	
GENHQ257	The following questions are about the quality of feedback you've received in this post. This can be formal or informal. To what extent do you agree or disagree with the following statements? The feedback I receive from supervisors/senior colleagues in this post is fair and constructive.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Feedback*	
GENHQ258	Sensitive feedback is always given in an appropriate way. (E.g. timely, face-to-face, privately, in person or via an electronic tool following a face-to-face conversation.)	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Feedback*	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ181	<p>We recognise that large, formal handovers, involving multi-disciplinary teams may not happen where you work. For these questions, please interpret 'handover arrangements' to refer to whatever arrangements you have in place, including smaller handovers just between doctors. If you feel it is not relevant at all for your situation, please select not applicable.</p> <p>To what extent do you agree or disagree with the following statements?</p> <p>Handover arrangements in this post always ensure continuity of care for patients BETWEEN SHIFTS.</p>	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Handover*	
GENHQ182	<p>Handover arrangements in this post always ensure continuity of care for patients BETWEEN DEPARTMENTS.</p>	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Handover*	
GENHQ97	<p>Appropriate members of the multidisciplinary team are included in handover.</p>	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Handover*	
GENHQ110	<p>In this post, handovers are used as a learning opportunity for doctors in training.</p>	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Handover*	
GENHQ33	<p>How would you rate the intensity of your work, by day in this post?</p>	Very light Light About right Heavy Very heavy	Workload*	
GENHQ34	<p>How would you rate the intensity of your work, by night in this post?</p>	Not applicable Very light Light About right Heavy Very heavy	Workload*	
GENHQ183	<p>In this post, how often (if at all) have you worked beyond your rostered hours? (if you are working Less Than Full Time please say how often you work more than your rostered LTFT hours)</p>	Daily Weekly Monthly Less than once a month Never	Workload*	
GENHQ184	<p>In this post, how often (if at all) have you been asked to or felt pressured to submit a record of hours worked that were less than the hours you actually worked?</p>	Never Once More than once N/A - there is no mechanism for submitting a record of hours worked	Standalone	
GENHQ185	<p>In this post, how often (if at all) did your working pattern leave you feeling short of sleep when at work?</p>	Daily Weekly Monthly Less than once a month Never	Workload*	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ137	To what extent do you agree or disagree with the following statement? In my current post, educational/training opportunities are RARELY lost due to gaps in the rota.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Rota design*	
GENHQ138	To what extent do you agree or disagree with the following statement? In my current post, gaps in the rota are dealt with appropriately to ensure my education and training is not adversely affected.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Rota design*	
GENHQ139	To what extent do you agree or disagree with the following statement? In my current post, there are enough staff to ensure that patients are always treated by someone with an appropriate level of clinical experience.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Rota design*	
GENHQ140	To what extent do you agree or disagree with the following statement? The rota design in my current post helps optimise trainee doctors' education and development.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Rota design*	
GENHQ141	Approximately how many weeks' notice, if any, were you given about the rota in advance of starting your current post?	No notice Less than 1 week 1 week 2 weeks 3 weeks 4 weeks 5 weeks 6 weeks 7 weeks 8 weeks 9 weeks 10 weeks 11 weeks 12 weeks Don't know	Standalone	
GENHQ196	In this post, do you always know who is providing your clinical supervision when you're working?	Yes, and they are accessible Yes, but they are not easy to access No, but there is usually someone I can contact No, and there is no one I can contact Not applicable	Clinical supervision*	
GENHQ186	In this post, how often (if ever) are you supervised by someone who you feel isn't competent to do so?	Daily Weekly Monthly Less than once a month Never Not applicable	Clinical supervision*	
GENHQ187	In this post, how often (if ever) do you feel forced to cope with clinical problems beyond your competence or experience?	Daily Weekly Monthly Less than once a month Never Not applicable	Clinical supervision*	
GENHQ188	In this post, how often (if ever) are you expected to obtain consent for procedures where you feel you do not understand the proposed interventions and its risks?	Daily Weekly Monthly Less than once a month Never Not applicable	Clinical supervision*	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ262	In this post, how often (if ever) do you feel apprehensive or hesitant about escalating a patient to the supervising clinician? This may be your named clinical supervisor, or it may be another doctor.	Daily Weekly Monthly Less than once a month Never Not applicable	Clinical supervision*	
GENHQ70	In this post, have you worked out of hours (this includes night shifts and weekends)?	Yes No Not applicable	Standalone	'Yes' branches to GENHQ208. 'No' and 'Not applicable' branch to GENHQ210.
GENHQ208	The following two questions relate to the facilities available to you when working out of hours. To what extent do you agree or disagree with the following statement? I have easy access to a catering facility providing suitable food OUT OF HOURS.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree I don't know There is no catering facility available to me at all in this post, out of hours Not applicable	Standalone	
GENHQ209	Rest facilities are available to me free of charge when working on-call, OUT OF HOURS.	Yes Partly (some facilities are available but I have to pay for certain items) No I don't know - I've not been given any information about rest facilities when working on-call, out-of-hours Not applicable	Standalone	
GENHQ206	The following questions relate to clinical supervision OUT OF HOURS. In this post, OUT OF HOURS, do you always know who is providing your clinical supervision when you're working?	Yes, and they are accessible Yes, but they are not easy to access No, but there is usually someone I can contact No, there is no one I can contact Not applicable	Standalone	
GENHQ189	In this post, OUT OF HOURS, how often (if ever) are you clinically supervised by someone who you felt wasn't competent to do so?	Daily Weekly Monthly Less than once a month Never Not applicable	Clinical supervision out-of-hours*	
GENHQ190	In this post, OUT OF HOURS, how often (if ever) do you feel forced to cope with clinical problems beyond your competence or experience?	Daily Weekly Monthly Less than once a month Never Not applicable	Clinical supervision out-of-hours*	
GENHQ191	In this post, OUT OF HOURS, how often (if ever) are you expected to obtain consent for procedures where you feel you do not understand the proposed interventions and its risks?	Daily Weekly Monthly Less than once a month Never Not applicable	Clinical supervision out-of-hours*	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ263	In this post, OUT OF HOURS, how often (if ever) do you feel apprehensive or hesitant about escalating a patient to the supervising clinician? This may be your named clinical supervisor, or it may be another doctor.	Daily Weekly Monthly Less than once a month Never Not applicable	Clinical supervision out-of-hours*	
GENHQ166	Please rate the quality of clinical supervision, OUT OF HOURS, in this post.	Very good Good Neither good nor poor Poor Very poor Not applicable	Clinical supervision out-of-hours*	
<p>The following questions are to gather your views on the resources and facilities available to you for appropriate rest and study. The questions relate to specific themes in the GMC's Promoting Excellence standards for postgraduate medical education and training. In particular:</p> <p>Theme 1: Learning environment and culture (R1:19)</p> <p>Theme 2: Educational governance and leadership (R2:6)</p> <p>Theme 3: Supporting learners (R3:2)</p>				
GENHQ211	At the start of this post I got all the information I needed about how to access the common room or mess.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable - there is no common room or mess available to me in this post	Facilities and resources for rest and study*	
GENHQ212	Please rate how good or poor the following are for your study needs in your current post: Wi-fi connectivity	Very good Good Neither good nor poor Poor Very poor None available at all Not applicable - I've not used it	Facilities and resources for rest and study*	
GENHQ213	The collection of online resources offered by the library service 24/7 (databases, journals, e-books).	Very good Good Neither good nor poor Poor Very poor None available at all Not applicable - I've not used them	Facilities and resources for rest and study*	
GENHQ214	Usability of online library resources (e.g. login support, NHS enabled, easy-to-use websites).	Very good Good Neither good nor poor Poor Very poor None available at all Not applicable - I've not used them	Facilities and resources for rest and study*	
GENHQ215	Please rate the quality of the common room or mess available to you in your current post. (Please consider the following: availability (24hrs, 7 days pw), accessibility, away from clinical areas, space for study, IT hardware available, showers, lockers, food preparation area.)	Very good Good Neither good nor poor Poor Very poor Not applicable - there is no common room or mess available to me in this post I can't say - I haven't used it	Facilities and resources for rest and study*	
GENHQ216	In my current post, there is a mechanism for me to travel safely to and from work when working out of hours or long shifts. (Please consider the following: short/safe/well-lit walk to car park/bus or train station, provision of free alternative transport if not available or too tired.)	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable I don't know	Standalone	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ218	I know who to contact in my trust/board (or equivalent) to discuss matters relating to occupational health and wellbeing.	Yes No I'm not sure	Standalone	
GENHQ220	The aim of this next question is to improve our understanding and the data we hold on the extent of working with wider healthcare professionals in training environments. Please indicate which of the following wider healthcare professionals you work with in this post. (Please select all that apply)	Advanced Nurse Practitioners Anaesthesia Associates Community Health Practitioners Dentists Healthcare scientists (e.g. clinical or biomedical scientists) Midwives Nurses Occupational therapists Pharmacists Physician Associates Physiotherapists Psychologists Radiographers Social workers Sonographers Other None	Standalone	
GENHQ114	To what extent do you agree or disagree with the following statements? My organisation encourages a culture of teamwork between multidiscipline healthcare professionals (for example nurses, midwives, radiographers etc.)	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Teamwork*	
GENHQ264	My organisation encourages a culture of shared learning and knowledge sharing between multidiscipline healthcare professionals.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Standalone	
GENHQ115	My organisation encourages a culture of teamwork between clinical departments.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Teamwork*	
GENHQ116	If I asked for help from outside my department, I'm confident I would receive it.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Teamwork*	
GENHQ117	To what extent do you agree or disagree with the following statements? I am confident that I know how, or could find out how, to raise a concern about my education and training.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Educational governance*	
GENHQ118	If I were to raise a concern about my education and training, I'm confident it would be addressed.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Educational governance*	
GENHQ119	I am confident that I know how, or could find out how, to escalate such a concern if I felt it wasn't being addressed.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Educational governance*	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ192	To what extent do you agree or disagree with the following statements? The working environment is a fully supportive one.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment*	
GENHQ193	Staff, including doctors in training, are always treated fairly.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment*	
GENHQ194	Staff, including doctors in training, always treat each other with respect.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment*	
GENHQ222	To what extent do you agree or disagree with the following statements? My department/unit/practice provides a supportive environment for everyone regardless of background, beliefs or identity.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment*	
GENHQ223	There is a culture of listening to doctors in training with regard to working practices.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree I don't know/can't say	Standalone	
GENHQ224	The following question aims to explore if there is any rudeness and/or incivility in your current department/unit or practice. Please think of this to mean any instance(s) of negative, rude or uncivil behaviour that made you, or the people you work with, feel uncomfortable or upset. To what extent do you agree or disagree with the following statement? Incident(s) of rudeness and incivility amongst doctors/healthcare staff are negatively affecting my experience in this post.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree I've not experienced any rudeness or incivility in this post	Supportive environment*	
GENHQ234	The following set of questions relate to discriminatory behaviours that may be occurring in your workplace. These questions are optional. The NTS confidentiality and data privacy policy applies to these questions – as it does to all multiple-choice questions within the survey. The results and our analysis will only ever be reported in aggregated form and individual responses will not be identifiable.		Standalone	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ251	<p>The questions will be an additional set and won't replace the current bullying and undermining section in the NTS. You'll still be able to report instances of bullying, undermining and discrimination using the free text comment facility in the closing section of the survey.</p> <p>If you've been affected by discrimination and don't know who to approach locally for support, there is more information and guidance about speaking up on our website</p> <p>There is also advice and support for dealing with discrimination on our ethical hub</p> <p>All the questions in this section are about discrimination from your colleagues/healthcare professionals - not from patients or relatives.</p>		Standalone	
GENHQ235	Would you like to answer the following questions about discrimination?	Yes No	Standalone	<p>If 'Yes' branches to GENQ236</p> <p>If 'No' branches to GENHQ250</p>
GENHQ236	In your current post, how often, if at all do you hear insults, stereotyping or jokes in your presence on the grounds of age, race (colour, nationality, ethnic or national origin), sex, gender reassignment, disability, sexual orientation, religion or belief, marital status or pregnancy/maternity?	Daily Weekly Monthly Less than once a month Never	Standalone	
GENHQ239	In your current post, how often, if at all are you intentionally humiliated in front of others?	Daily Weekly Monthly Less than once a month Never	Standalone	
GENHQ240	In your current post, how often, if at all are you ignored or excluded from conversations, groups or meetings?	Daily Weekly Monthly Less than once a month Never	Standalone	
GENHQ241	In your current post how often, if at all do you experience unwelcome sexual comments or advances causing you embarrassment, distress or offence?	Daily Weekly Monthly Less than once a month Never	Standalone	
GENHQ245	In your current post, how often, if at all are you not given the same training opportunities as your peers at the same stage of training? (e.g. opportunity to observe an unusual case)	Daily Weekly Monthly Less than once a month Never	Standalone	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ246	<p>In your current post, how often, if at all do you experience micro-aggressions, negative comments or oppressive body language from colleagues?</p> <p>(Examples could include, but are not limited to: derogatory comments or actions such as tutting or eye-rolling, silences, using a patronising tone, inconsiderate scheduling, having your work unfairly or overly scrutinised, reasonable adjustments not being met, and making negative remarks relating to personal differences (e.g. appearance, socio-economic background, working less than full-time, being less committed to medicine due to family commitments, etc).</p>	Daily Weekly Monthly Less than once a month Never	Standalone	
GENHQ247	I am confident that I know how, or could find out how, to report discrimination where I work.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Standalone	
GENHQ248	<p>The next question asks about your confidence to report discrimination you've experienced from colleagues/healthcare professionals. Adverse consequences could mean any negative impact on you, for example: your training/career, relationship with colleagues, feeling isolated/unsupported, your wellbeing etc.</p> <p>I feel confident about reporting discrimination where I work without fear of adverse consequences (reporting can be during your post or afterwards).</p>	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Standalone	
GENHQ249	<p>In this question by 'challenge' we mean, would you feel confident saying something to the individual face-to-face. This is different to reporting an incident through formal channels.</p> <p>In this post, I feel confident to challenge discrimination and unprofessional behaviours amongst my colleagues and healthcare professionals.</p>	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Standalone	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ250	<p>The next question is about your experience of mentoring. This is separate to the support you receive as part of educational supervision.</p> <p>Mentoring is a learning partnership between a mentor who shares their expertise, skills and experience with an often more junior mentee. Guidance is focused on long-term development and career progression. It can be formal or informal. It could be with a more senior trainee, a consultant, specialty or associate specialist (SAS) doctor or someone else.</p> <p>Do you have support from a mentor (excluding the meetings you have with your education or clinical supervisor) who supports and guides you with your career and/or personal development? (tick all that apply)</p>	<p>Yes - formal mentoring scheme through my employer (e.g. your trust or site of work) Yes - formal scheme through my deanery/NHSE regional team Yes - formal scheme through my royal college or faculty Yes - formal scheme through another organisation Yes - informal mentoring from another clinician Yes – informal other No support from a mentor</p>	Standalone	
GENHQ233	<p>The following question refers to leadership opportunities in your workplace. Opportunities may vary and depend on your training level.</p> <p>Examples include (but not limited to): managing rotas, managing other trainees, observing meetings, shadowing other clinical leaders and/or observing senior management/leadership meetings.</p> <p>To what extent do you agree or disagree with the following statement?</p> <p>In this post, I am given opportunities to develop my leadership skills relevant for my stage of training.</p>	<p>Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable</p>	Standalone	
GENHQ100	<p>To what extent do you agree with the following statements?</p> <p>I have been made aware of how to report patient safety incidents and near misses.</p>	<p>Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree</p>	Reporting systems*	
GENHQ101	<p>There is a culture of proactively reporting concerns.</p>	<p>Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree</p>	Reporting systems*	
GENHQ102	<p>There is a culture of learning lessons from concerns raised.</p>	<p>Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree</p>	Reporting systems*	
GENHQ103	<p>I am confident that concerns are effectively dealt with.</p>	<p>Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree N/A (not aware of any concerns being raised)</p>	Reporting systems*	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ104	When concerns are raised, the subsequent actions are fed back appropriately.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree N/A (not aware of any concerns being raised)	Reporting systems*	
GENHQ167	Please rate the quality of clinical supervision in this post.	Very good Good Neither good nor poor Poor Very poor	Clinical supervision* AND Overall satisfaction*	
GENHQ55	How would you rate the quality of experience in this post?	Very good Good Neither good nor poor Poor Very poor	Overall satisfaction*	
GENHQ56	How would you rate the practical experience you are receiving in this post?	Very good Good Neither good nor poor Poor Very poor	Standalone	
GENHQ168	Please consider your learning outcomes and/or curriculum competencies for this question. To what extent do you agree or disagree with the following statement? I am confident that this post will help me acquire the competencies I need at my current stage of training.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Adequate experience*	
GENHQ255	To what extent do you agree or disagree with the following statement? This post is providing me with enough training opportunities to adequately prepare me for my next relevant professional exam(s).	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Standalone	
GENHQ256	I am on course to gain enough experience in the operative/practical procedures needed for my stage of training. GP trainees: please consider the Clinical Examination and Procedural Skills (CEPS) when answering this question.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree I don't know Not applicable - operative/practical procedures are not part of my curriculum	Standalone	
GENHQ169	How would you describe this post to a friend who was thinking of applying for it?	Very good Good Neither good nor poor Poor Very poor	Overall satisfaction*	
GENHQ170	To what extent do you agree or disagree with the following statement? This post will be useful for my future career.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Overall satisfaction*	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ142	Which of the following best describes what you see yourself doing one year from now? (Please select one option only)	Continuing my training or working as a consultant/GP Continuing my training or working as a consultant/GP but changing specialties Obtaining a service post (i.e. working as a doctor but not in a training programme) Working as a locum Working as a doctor outside the NHS (i.e. private practice) Working as a doctor outside the UK (permanently) Working as a doctor outside the UK (temporarily) Taking a career break Leaving medicine permanently Undecided Other	Standalone	
GENHQ144	Reflecting on your answer to the previous question, which of the following factors are important to you when making plans for the future? (tick all that apply)	Completing training Availability of consultant/GP posts Caring responsibilities (e.g. for family or dependents) Financial considerations (e.g. salary, cost of living) Gaining experience in a specific area within a specialty Healthcare system pressures Interest in my current specialty or role Personal health and wellbeing Preference to work in a particular location The fit between my skills/personality and the specialty Taking time out for research/academic Poor workplace culture (e.g. unprofessional behaviours, bullying and undermining) Work/life balance Gaining experience in a particular specialty or setting Meeting training requirements not provided on my current programme Wanting to gain further experience before making a decision Other	Standalone	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ150	Are you formally working on a Less Than Full Time (LTFT) basis, which has been approved by your deanery/NHSE regional team?	Yes No I applied to work LTFT, but it was not approved I considered working LTFT, but I did not apply	Less than full time training	'Yes' branches to GENHQ151 'No' branches to GENHQ226 'I applied to work LTFT, but it was not approved' branches to GENHQ259 'I considered working LTFT, but I did not apply' branches to GENHQ152
GENHQ151	In your current post, what percentage of full-time working are you approved to do?	Less than 50% 50% 60% 70% 80% More than 80% Other Uncertain	Less than full time training	
GENHQ261	This question is about challenges you may have faced training less than full time in your current post. In this post have you experienced any of the following challenges working less than full time? (tick all that apply)	N/A - I've not experienced challenges LTFT in this post Rota design issues Balancing clinical and academic/research commitments Balancing work and personal commitments Financial concerns Negative workplace attitudes towards LTFT Changing posts process Availability of LTFT posts Administrative issues e.g. annual leave allocation or being paid incorrectly Other	Less than full time training	
GENHQ259	The next two questions are about your experience of applying for less than full time training (LTFT). To what extent do you agree or disagree with the following statements? The application process for LTFT was straightforward.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree I don't know Not applicable – I don't remember	Less than full time training	
GENHQ260	When I applied for LTFT I received clear and helpful guidance from my NHSE regional team/deanery. This may be through a LTFT champion, Training Programme Director or other person.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree I don't know Not applicable - I don't remember Not applicable - I didn't require any guidance from my NHSE regional team or deanery	Less than full time training	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ152	<p>The following question asks about your reasons for working less than full time. There are two options for caring for a child - to separate out those caring for a child with additional needs. Feel free to select both if applicable.</p> <p>Which of the following best describes why you chose to train (or have considered training) on a less than full time basis? (tick all that apply).</p>	<p>Disability, illness or health related reason Childcare Caring for a child with a disability, long term illness or additional needs Caring for an adult (e.g. a parent, family member or friend) Other work commitments (e.g. professional development opportunities) Other external commitments (e.g. leisure, religious or community commitments) To focus on clinical academic research or study To have a better work life balance To support my return to work following time out of clinical practice I'm part of a current (or previous) LTFT pilot offered by my speciality Other</p>	Less than full time training	
GENHQ226	<p>The following questions are about the support you may have received following time out of clinical practice of 3 months or more. This may have been due to illness, parental leave, bereavement, caring responsibilities or to undertake research.</p> <p>If you have not had time out for these reasons, please select no and you will be routed to the next section.</p> <p>Those who've had a pause in training but continued to work clinically in some capacity e.g. took an 'F3' year, worked as a clinical fellow, trust doctor or locum etc. should not answer these questions. Please select no to move to the next section.</p> <p>In the last 12 months, have you returned to your clinical practice following time out of training of 3 months or more? (Please select the main reason)</p>	<p>No Yes - parental leave Yes - illness/health condition Yes – bereavement Yes - caring responsibilities Yes - to undertake research Yes - other</p>	Standalone	<p>'Yes - parental leave Yes - illness/health condition Yes – bereavement Yes - caring responsibilities Yes - to undertake research Yes – shielding Yes – other' branches to GENHQ227</p> <p>'No' branches to GENHQ207</p>
GENHQ227	<p>Were you able to plan for your individual needs with your educational or clinical supervisor (or similar) before your return to clinical practice? Please select one option only.</p>	<p>Yes - I was able to plan before my absence started Yes - I was able to plan during my absence before I returned Yes - I was able to plan as I returned to clinical practice Yes - a mix of planning before my absence, during and/or as I returned Yes - the option to plan was available but it wasn't necessary No - I was unable to make a plan at any point</p>	Standalone	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ228	To what extent do you agree or disagree with the following statement? The plan was implemented to effectively support my return to clinical practice.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Standalone	
GENHQ229	Support for returning to clinical practice could include: <ul style="list-style-type: none"> local support/training provided by your trust/practice/department support/training provided by your college/faculty wider professional or wellbeing support provided by another organisation Have you been able to access the support/resources you need for your return to clinical practice? Please select one option only.	Yes - fully planned and tailored to my needs Partially - some planning and support activities/training provided by different sources Partially - full plan but employer unable to provide support Partially - full plan but supervisor unable to provide support Partially - full plan but deanery/NHSE regional team unable to provide support Partially - no plan but I've accessed some generic support myself No - I've not been able to access any support/resources Support was available but I didn't need any	Standalone	
GENHQ230	Were you given the opportunity to make adjustments to the planned rota before your start date to support your return (for example, to ensure adequate supervision or to avoid night shifts)?	Yes - all adjustments to the rota I needed were made Yes - I was able to make adjustments but did not need to Partially - some adjustments I needed were made but not all No - I wasn't able to make any adjustments to the rota Not applicable	Standalone	
GENHQ231	Did you return to work on a Less Than Full Time (LTFT) basis following your time out of clinical practice?	Yes - but I was LTFT before my time out 2~Yes - it was the first time I worked LTFT 3~No - I returned full-time	Standalone	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ207	<p>This section of the survey is focused on burnout. There's no obligation to answer these questions, but if you do, you'll help us understand the prevalence of burnout risk in medicine and any impact this is having on training. The findings will contribute towards wider research in this area and will help shape future support for doctors in training.</p> <p>Your answers are confidential. We will assign your responses into one of three burnout categories (low, moderate, high risk) and report this in aggregated and confidential form (i.e. the number of respondents per category). We won't publish the results if you work in a department with fewer than three trainees or trainers.</p> <p>The questions are taken from the Copenhagen Burnout Inventory – an internationally recognised and validated question set designed to measure wellbeing. Work-related burnout is defined in the Inventory as a state of prolonged physical and psychological exhaustion, which is perceived as related to the person's work.</p> <p>If you're worried you may be experiencing burnout and don't know who to approach locally for support, our website: www.gmc-uk.org/wellbeingsupport has contact details for organisations who can help.</p> <p>Would you like to answer the following burnout questions?</p>	Yes No	Burnout	'Yes' branches to GENHQ198 'No' branches to GENHQ76
GENHQ198	Is your work emotionally exhausting?	To a very high degree To a high degree Somewhat To a low degree To a very low degree	Burnout	
GENHQ199	Do you feel burnt out because of your work?	To a very high degree To a high degree Somewhat To a low degree To a very low degree	Burnout	
GENHQ200	Does your work frustrate you?	To a very high degree To a high degree Somewhat To a low degree To a very low degree	Burnout	
GENHQ201	Do you feel worn out at the end of the working day?	Always Often Sometimes Seldom Never/almost never	Burnout	

Question number	Question	Answers	Indicator / standalone	Branching
GENHQ202	Are you exhausted in the morning at the thought of another day at work?	Always Often Sometimes Seldom Never/almost never	Burnout	
GENHQ203	Do you feel that every working hour is tiring for you?	Always Often Sometimes Seldom Never/almost never	Burnout	
GENHQ204	Do you have enough energy for family and friends during leisure time?	Always Often Sometimes Seldom Never/almost never	Burnout	
GENHQ77	<p>The following section asks about experiences undertaking clinical academic research or study. This may be as part of an integrated clinical academic programme, a locally or organisation-funded scheme, or the use of your protected research time to conduct research in a post. If any of the above applies, please select yes to answer the academic questions, even if the time wasn't protected.</p> <p>Have you used your protected research time to undertake research in the last 12 months?</p>	Yes No	Academic training (generic script only)	'Yes' branches to academic questions. 'No' skip academic questions
GENHQ76	<p>Which, if any, of the following clinical academic roles do you currently hold?</p> <p>Please note - an academic traineeship occurs when a trainee is undertaking formal academic training alongside their clinical training or has taken time out of clinical training to undertake academic training.</p>	Specialised Foundation Programme (SFP) Academic Clinical Fellow (ACF) – England Clinical Research Training Fellowship (CRTF) – England Clinical Lecturer – England Academic Clinical Fellow (ACF) – Northern Ireland Academic Clinical Lecturer (ACL) – Northern Ireland General Practice Academic Research Training Scheme (GPARTS) – Northern Ireland Clinical Research Fellow (CRF) – Scotland Clinical Teaching Fellow – Scotland Scottish Clinical Research Excellence Development Scheme (SCREDS) lecturer Clinical Lecturer – Wales General Practice Specialty Academic Training (GPSAT) programme – Wales Wales Clinical Academic Training (WCAT) Fellow Other academic role Not applicable	Academic training	

Question number	Question	Answers	Indicator / standalone	Branching
ACADHQ50	Which, if any, of the following organisations fund the academic component of your post?	National Institute for Health Research (NIHR) Chief Scientist Office (CSO) Health and Care Research Wales (HCRW) Health and Social Care Research and Development (HSC R&D Division) Medical Research Council (MRC) The Wellcome Trust Locally funded by a trust University or other higher education institution Royal College/Faculty fellowship, award or grant Other institution/charity funding Other I don't know Not applicable	Academic training	
ACADHQ64	Please select the institution the academic component of your post is associated with:	Institution list...	Academic training	
ACADHQ51	What is your main area of research/academic activity? Please select one.	Clinical trials and therapeutic intervention Translational medicine Biomedical and laboratory research Medical education and workforce development Health system leadership and organisational development Health data science Health informatics Population health and epidemiology Digital health, AI and data-driven technologies Primary, community and integrated care Other	Academic training	

Question number	Question	Answers	Indicator / standalone	Branching
ACADHQ52	Do you have a clear idea of how your research/academic time is going to be structured for the duration of your current post?	Yes, I have a detailed and clear structure Yes, I have a general idea, but some details are unclear Yes, I have a rough idea, but it's mostly unstructured No, I have no idea how it's structured Not applicable - I don't expect to have dedicated research/academic time	Academic training	<p>"Yes, I have a detailed and clear structure Yes, I have a general idea, but some details are unclear Yes, I have a rough idea, but it's mostly unstructured" branches to ACADHQ65</p> <p>"No, I have no idea how it's structured Not applicable - I don't expect to have dedicated research/academic time" branches to ACADHQ66</p>
ACADHQ65	On what basis is your research/academic time structured?	Day release (e.g. 1 or 2 days a week) Block release (e.g. 6 weeks to 6 months exclusive research time) Hybrid day release and block release arrangement Not sure	Academic training	
ACADHQ66	To what extent has your research/academic time been protected since starting your current post (excluding on-call commitments)?	Always protected Occasionally used for clinical service Frequently used for clinical service	Academic training	
ACADHQ67	To what extent has your research/academic time been protected within the last year (excluding on-call commitments)?	Always protected Occasionally used for clinical service Frequently used for clinical service	Academic training	
ACADHQ53	When your protected research/academic time is used for clinical service, how often are you able to take back an equivalent amount of time at a later date?	Always Often Sometimes Rarely Never Not applicable	Academic training	
ACADHQ54	To what extent do you agree or disagree with the following statement? My on-call commitments do not adversely affect my research/academic time.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable - I don't have on-call commitments	Academic training	

Question number	Question	Answers	Indicator / standalone	Branching
ACADHQ55	<p>Which, if any, of the following supervisors support you with your research/academic study? Tick all that apply.</p> <p>Research supervisor: Provides day-to-day supervision of your research project, including study design, methodology, analysis, and outputs.</p> <p>Academic supervisor: Provides oversight of your overall academic training and development, including career progression, training opportunities, and balancing clinical and academic commitments.</p> <p>Educational supervisor: Responsible for the overall supervision and management of a trainee's learning and educational progress during a placement or series of placements.</p>	Academic supervisor Research supervisor Educational supervisor I do not currently have a supervisor supporting my research/academic study I'm not sure	Academic training	
ACADHQ56	Overall, how would you rate the quality of the supervision that supports your research or academic study?	N/A - I don't have academic-specific supervision Very good Good Neither good nor poor Poor Very poor	Academic training	
ACADHQ57	Have you had a formal review of your academic progress in your current post (e.g. through an appraisal or development of a personal development plan)?	Yes No Don't know	Academic training	<p>"Yes" branches to ACADHQ68</p> <p>"No Don't know" branches to ACADHQ69</p>
ACADHQ68	To what extent do you agree or disagree with the following statement? The formal review of my academic progress was useful.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Academic training	
ACADHQ69	Have you received career advice about progressing a clinical academic career?	Yes, and it was useful Yes, but it wasn't useful No, but this will happen No, but it wasn't necessary No, but I would like to	Academic training	
ACADHQ70	Have you had access to an academic mentoring scheme?	Yes (and I have used it) Yes (but I haven't used it) No I don't know	Academic training	
ACADHQ71	To what extent do you agree or disagree with the following statements? The clinical and academic aspects of my post are well integrated.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Academic training	
ACADHQ58	My Training Programme Director supports me to focus on my academic/research work, including accommodating this alongside clinical requirements.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Academic training	

Question number	Question	Answers	Indicator / standalone	Branching
ACADHQ59	My Specialty Academic Lead(s) provides appropriate support and guidance to help me meet the academic requirements in my current post.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Academic training	
ACADHQ60	I am able to meet both the clinical and academic training requirements of my post.	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Academic training	
ACADHQ61	What are the planned outputs of your research activity? (Tick all that apply)	Data sets Software Peer-reviewed publications /research papers Securing further funding/grants Conference abstracts/presentations Policy Intellectual property Therapeutics Guidelines Educational programme (e.g. a course, module or curricula) Patient and public involvement and engagement (PPIE) activities Other	Academic training	

Question number	Question	Answers	Indicator / standalone	Branching
ACADHQ62	Thinking about your role in clinical academia/research, which of the following best describes what you expect to be doing one year from now? Select one option only.	Clinical academic post in the UK Clinical academic post abroad Specialty training in the UK AND involved in research/academia Specialty training in the UK NOT involved in research/academia Medical related fellowship/PhD position Non-training clinical work in the UK (e.g. locally employed or SAS role) Clinical work abroad Career break Leaving medicine permanently Undecided Other	Academic training	"Clinical academic post abroad Specialty training in the UK AND involved in research/academia Specialty training in the UK NOT involved in research/academia Non-training clinical work in the UK (e.g. locally employed or SAS role) Clinical work abroad Career break Leaving medicine permanently" branches to ACADQ123 Any other response branches to ACADQ124

Question number	Question	Answers	Indicator / standalone	Branching
ACADHQ63	Reflecting on your answer to the previous question, which of the following factors have influenced your plans? (Tick all that apply)	Change in research or career interests Preference for more clinical work Difficulties securing research funding Limited availability of academic or research posts Administrative or bureaucratic barriers to research Insufficient protected research or academic time Better academic or research opportunities outside the UK Desire for more flexible working arrangements Lack of support from academic or research supervisors Difficulty accessing essential research staff or infrastructure Financial pressures or considerations Caring or family responsibilities Unsatisfactory contract terms (e.g. pay, pension, leave) Poor work–life balance Other	Academic training	

Thank you for completing the questions about your post. Click next to move to the next section

CLSGQ91	<p>The following sections provide you with the opportunity to raise concerns about any bullying and undermining you have experienced, or concerns you have about patient safety.</p> <p>Raising concerns about a doctor's fitness to practise</p> <p>Your comment(s) in the survey relating to either bullying and undermining or patient safety are not fitness to practise referral(s). If your concern is about the fitness to practise of a doctor, please see the guidance on raising concerns on our website, where you can also find details of our confidential helpline.</p> <p>If you'd like more information, advice and support about speaking up and raising concerns please see our webpage about speaking up.</p>		Bullying and undermining	
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Question number	Question	Answers	Indicator / standalone	Branching
CLSGQ92	<p data-bbox="248 156 792 188">Your bullying and undermining concerns</p> <p data-bbox="248 196 1014 459">The following questions are about your experiences of bullying and undermining in your role. This could include belittling and humiliation, rudeness or incivility (e.g. talking down to somebody, making demeaning remarks, blaming someone for something they didn't do, or not listening) as well as threatening behaviour or insults. It could also include bullying relating to any of the nine protected characteristics or deliberately stopping somebody from accessing training.</p> <p data-bbox="248 507 1014 927">The first question asks if you've experienced or witnessed any type of bullying, undermining or harassment behaviours. This is simply to help us understand the proportion of trainees who've been affected by these behaviours. The response options give you the choice to report your bullying and undermining concern in a free text box, if you wish to. If you select the option not to report your concern, we ask you to indicate your reason for this. As with all other multiple-choice questions in the survey, your responses to these questions will be kept completely confidential. If you choose to report your concern in a free text comment in the survey, we may handle the information you provide differently so that it can be investigated. Details on our process for this are provided in full on the next page.</p> <p data-bbox="248 975 1014 1038">If your experience of bullying and undermining has affected your health and wellbeing, you can access support here.</p>		Bullying and undermining	

Question number	Question	Answers	Indicator / standalone	Branching
CLSGQ93	<p>Raising written bullying/undermining concerns about your training post.</p> <p>What is the process?</p>	<ol style="list-style-type: none"> 1. We require that all free text comments are investigated by your deanery/NHSE regional team. 2. To investigate your comment, we will share the following with your deanery/NHSE regional team: <ul style="list-style-type: none"> ▪ Your free text comment ▪ Your training site ▪ Your post specialty ▪ Your programme specialty ▪ Your training level 3. The deanery/NHSE regional team will liaise directly with the organisation/trust you are working for, in order to undertake a thorough investigation, as appropriate. 4. We check each deanery/NHSE regional team response, to ensure that we are satisfied with the outcome. <p>Am I guaranteed anonymity?</p> <p>No.</p> <p>Your individual answers to the multiple-choice questions in the survey will always remain confidential.</p> <p>Concerns about bullying/undermining that you raise in the free text comment in the survey will also be treated as confidential and will not be made public by the GMC. Answers are only used by the GMC to support its statutory functions related to medical education and training. However, because of the importance of ensuring a safe training environment, this is subject to three exceptions.</p>	Bullying and undermining	

Question number	Question	Answers	Indicator / standalone	Branching
CLSGQ94	<p>Firstly, as explained above, we will share your free text comment and other information about you with your deanery/NHSE regional team so that they can investigate your concern.</p> <p>We will not routinely share your identity when we share your concern. However, in some cases, the deanery/NHSE regional team may ask who you are so they can ask you for further details about your concern. In this case, we will share your identity.</p> <p>This is because of the importance of addressing any issues that can create an unsafe training environment. If we do this, we'll let you know.</p> <p>Secondly, if the concern you raise about bullying/undermining becomes relevant to a fitness to practise investigation then we will share your comment with the Fitness to Practise Directorate. We'll let you know if we do this. This could include circumstances where fitness to practise proceedings are taken against a doctor, where there are grounds to believe that doctor has raised a concern that is not honest or made in good faith.</p> <p>Thirdly, we will share comments with appropriate regulatory bodies where there is a legitimate need to do so.</p> <p>In all of the above situations, we expect your full cooperation with the process. We value your openness and transparency and we will support you provided that you act honestly and in good faith.</p>		Bullying and undermining	
CLSGQ95	Have you been the victim of, or witnessed, any bullying or harassment in this post?		Bullying and undermining	<p>Yes, and I wish to report it here branches to 'CLSGQ96'</p> <p>Yes, but I don't want to report it here branches to 'CLSGQ101'</p> <p>No branches to 'CLSGQ75'</p>
CLSGQ103	I have read the information on the previous pages about what will happen to my free text comment and understand that my identity may need to be shared in some circumstances.	Yes		

Question number	Question	Answers	Indicator / standalone	Branching
CLSGQ96	<p>Your bullying or undermining concern</p> <p>Please use the text box below.</p> <p>Your comment will be taken seriously and investigated. This means that it is your responsibility to:</p> <ul style="list-style-type: none"> ▪ write factually and accurately about your own experience, not hearsay ▪ describe specific incidents ▪ describe specific behaviours <p>Please note there is a limit of 2,000 characters within the box. If you exceed the limit, you will encounter an error message.</p> <p>Once finished, please use the categorisation questions below. When asked to describe the type of bullying behaviour you've experienced, you can only select one option. However, if you've experienced more than one type, please provide details in your comment here.</p>		Bullying and undermining	
CLSGQ97	Please specify who has been doing the undermining/bullying described in your concern (please select all that apply).	Consultant/GP (within my post) Consultant/GP (outside my post) Nurse/midwife Other doctor Other trainee Management Patient/relative Other	Bullying and undermining	
CLSGQ98	If you selected 'other' please provide a description.	[free text]	Bullying and undermining	
CLSGQ99	Which behaviour types describe your concern? (Please select one only)	Belittling or humiliation Threatening or insulting behaviour Deliberately preventing access to training Rudeness and incivility Bullying related to age Bullying related to disability Bullying related to gender reassignment Bullying related to marriage or civil partnership Bullying related to pregnancy or maternity Bullying related to race Bullying related to religion or belief Bullying related to sex Bullying related to sexual orientation Other	Bullying and undermining	
CLSGQ100	If you selected 'other' please provide a description.	[free text]	Bullying and undermining	

Question number	Question	Answers	Indicator / standalone	Branching
CLSGQ101	Which of the following describes why you don't want to report this? (Please select all that apply)	The issue has already been resolved locally I have raised it, or intend to raise the issue locally instead I don't think the issue is serious enough to report I don't think reporting will make a difference Fear of adverse consequences Other	Bullying and undermining	
CLSGQ75	<p>Patient safety</p> <p>You now have an opportunity to raise any patient safety concerns about your post.</p> <p>All doctors have a duty to act when they believe patient safety is at risk, or when a patient's dignity or comfort is being compromised. This includes raising concerns through local channels when they arise.</p> <p>The organisation where you are currently working may be the most appropriate and effective place for you to raise the concern and this should be your first consideration.</p> <p>What is the process?</p> <ol style="list-style-type: none"> 1. We require that all concerns will be investigated by your deanery/NHSE regional team 2. To investigate your comment, we will share the following with your deanery/NHSE regional team: <ul style="list-style-type: none"> ▪ Your verbatim comment ▪ Your training site ▪ Your post specialty ▪ Your programme specialty ▪ Your training level 3. The deanery/NHSE regional team will liaise directly with the organisation/trust you are working for (your employer), in order to undertake a thorough investigation, as appropriate. 4. We check each deanery/NHSE regional team response, to ensure that we are satisfied with the outcome. 	Free text	Patient safety	

Question number	Question	Answers	Indicator / standalone	Branching
CLSGQ88	<p>Am I guaranteed anonymity?</p> <p>No.</p> <p>Your individual answers to the multiple-choice questions in the survey will always remain confidential.</p> <p>Concerns about patient safety that you raise within the survey will also be treated as confidential and will not be made public by the GMC or shared outside the GMC's Education Directorate. However, because patient safety must come first, this is subject to three exceptions.</p>		Patient safety	
CLSGQ89	<p>Firstly, as explained above, we will share your verbatim comment and other information about you with your deanery/NHSE regional team so that they can investigate your concern. We will not routinely share your identity when we share your concern. However, in some cases, the deanery/NHSE regional team may ask who you are so they can ask you for further details about your concern. In this case, we will share your identity. This is because our first priority must be the care of patients. If we do this, we'll let you know.</p> <p>Secondly, if the concern you raise about patient safety becomes relevant to a fitness to practise investigation then we will share your comment with the Fitness to Practise Directorate. We'll let you know if we do this. This could include circumstances where fitness to practise proceedings are taken against a doctor, where there are grounds to believe that doctor has raised a concern that is not honest or made in good faith.</p> <p>Thirdly, we will share comments with appropriate regulatory bodies where there is a legitimate need to do so.</p> <p>In all of the above situations, we expect your full co-operation with the process. We value your openness and transparency and we will support you provided that you act honestly and in good faith.</p>		Patient safety	

Question number	Question	Answers	Indicator / standalone	Branching
CLSGQ60	In this post, have you had any concerns about patient safety?	No Yes, but they are already being addressed, or have been resolved Yes, and they have not yet been addressed	Patient safety	'No' and 'Yes, but they are already being addressed, or have been resolved' branch to CLSGQ87. 'Yes, and they have not yet been addressed' branch to CLSGQ78.
CLSGQ104	I have read the information on the previous pages about what will happen to my free text comment and understand that my identity may need to be shared in some circumstances.	Yes		
CLSGQ78	<p>What to include in your comment</p> <p>Please write your comment in the box below and include (as appropriate):</p> <ul style="list-style-type: none"> a clear description of the incident(s)/processes giving rise to the risk, including location (e.g. ward) use accurate and factual examples relating to your personal experience, not hearsay avoid commenting on wider general service issues which do not relate to a specific incident if appropriate, suggest the improvements you would like to see 	Free text	Patient safety	
CLSGQ63	If you work across multiple sites please tell us the Trust and Site where the concern applies.	Free text	Patient safety	
CLSGQ65	When did you first become concerned about patient safety in your post?	Within the last month Over a month ago but less than 3 months ago Over three months ago	Patient safety	
CLSGQ85	As far as you are aware, has this patient safety concern been reported (for example, to your employer or another body)?	Yes No Don't know	Patient safety	
CLSGQ86	Who was the patient safety concern reported to (please select all that apply)?	My employer My deanery/NHSE regional team GMC Another body Don't know N/A - it has not been reported as far as I know	Patient safety	

Question number	Question	Answers	Indicator / standalone	Branching
CLSGQ102	<p>So we, and your deanery, can effectively assess and address the concerns raised, we'd like you to categorise your patient safety concern under one of two options.</p> <p>This will help tell us whether your concern is a risk (potential for patient harm) or an issue (actual patient harm).</p> <p>Please select one option.</p>	Potential patient harm Actual patient harm has occurred	Patient safety	
CLSGQ84	<p>Thank you for raising a patient safety concern</p> <p>The safety of patients is our first concern and we will now work with your deanery/NHSE regional team and your employer to review the information you have provided and investigate the problem where appropriate.</p> <p>Next steps:</p> <ul style="list-style-type: none"> ▪ We will share your verbatim comment with your deanery/NHSE regional team immediately. ▪ We will not automatically share your identity, but we will tell them your training site, post specialty, programme specialty and training level to help locate the concern. ▪ The deanery/NHSE regional team will liaise directly with the organisation you are training in, in order to undertake a thorough investigation, if one is necessary. ▪ In some cases we will need to tell your deanery/NHSE regional team who you are, to enable a thorough investigation of the problem. If we do this, we will let you know by email. <p>You can read more about what happens to concerns raised in the survey in the guidance on raising concerns on our website and for more information about confidentiality please read our data protection notice.</p>		Patient safety	
CLSGQ87	<p>We keep a list of doctors who are interested in being involved in future research or helping us develop improvements to the survey.</p> <p>There is of course no obligation for people on the list to participate, and you can be removed from the list upon request.</p> <p>If you're interested in being involved in future survey work, please select the appropriate response below.</p>	Yes, please add me to the list No thanks	Demographic (involvement in future research)	

Thank you for completing the final questions on the survey. Click next to move to the next screen which will show your completion code.