National training survey comments\textsuperscript{1} management in 2021

Briefing note 4 for deaneries/local teams

The process for 2021

1 You will receive comments live during the survey window as soon as they are raised by respondents.

2 You will have until 23 July 2021 to investigate and respond to comments via GMC Connect.

3 You are encouraged to resolve issues raised in the comments through your own local processes without reporting to us on them unless these issues meet your usual threshold for inclusion in the Quality Reporting System (QRS) or require further action from the GMC.

4 We will review deanery/local team NTS comment responses to ensure appropriate action is being taken.

\textsuperscript{1} This briefing note relates to the survey of doctors in training only. Trainers will not be able to raise concerns through the national training survey.
**Timeline**

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 April-18 May</td>
<td>Survey open. NTS comments shared live with deaneries/local teams.</td>
</tr>
<tr>
<td>23 July</td>
<td>Deadline for deaneries/local teams to respond to all NTS comments.</td>
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<tr>
<td>August</td>
<td>GMC reviews deanery/local team NTS comments responses.</td>
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<tr>
<td>September</td>
<td>Verified concerns identified through NTS comments which meet the threshold added to Quality Reporting System (QRS). Other concerns are to be monitored locally.</td>
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**Accessing comments**

All comments raised within the survey, both patient safety and bullying and undermining comments, will be instantly available within deanery/local team GMC Connect accounts.

A user guide for the system is available in the documents folder in GMC Connect. If you need any further assistance with accessing comments please contact us at nts@gmc-uk.org.

**Who has access to my deanery/local team’s 2021 NTS Comments folder?**

NTS comments can be sensitive. For this reason, only nominated contacts can access the 2021 NTS comments folder for each deanery/local team in GMC Connect. Before the survey starts, we will contact our primary survey contact at each deanery/local team to ask you to update and confirm who should have access.

You can change this at a later date by contacting us at nts@gmc-uk.org.
**Responding to comments**

You must respond to all patient safety and bullying and undermining comments via GMC Connect.

There is a single deadline for responding to all comments at the end of the survey (23 July 2021). However, if an issue needs to be referred to the enhanced monitoring process, you should do this immediately, rather than waiting for the response deadline.

**Choosing a response option**

Depending on the issue raised in the comment, you will need to decide whether the issue relates to an area that requires monitoring and, if so, which monitoring process would be most appropriate.

There are now four possible outcomes for issues raised in the survey:

a. monitor through local processes  
b. monitor through the Quality Reporting System (QRS)  
c. monitor through the enhanced monitoring process or  
d. close the issue (if no further action is required)

To help identify which of the above reporting and monitoring outcomes is most appropriate and to highlight whether an issue has already been reported to us (known issues) or not (unknown issues), there are seven pre-defined response options within the comments response template.

The response map on page 7 and the table beneath it explains the different response paths, the actions required by you in each instance and how we will treat comments on each respective path.

**Monitoring: routine monitoring and enhanced monitoring**

Issues that need to be reported to and monitored by the GMC are those that severely affect:

- trainee or patient safety  
- the progression of doctors in training  
- the quality of the training environment, calling into question its fitness for training doctors

We have two established monitoring processes:

- routine monitoring via the QRS  
- enhanced monitoring

Issues raised in the comments can be monitored through local process where the risk/impact is relatively low and does not meet your usual thresholds for issues to be entered onto the QRS.

However, we may still add items to the QRS if we or you are particularly concerned about an issue and feel that it needs closer monitoring.

For example, if an issue represents a serious risk to patient safety or the quality of training, or if local processes have not resolved the issue this would then meet the usual threshold to be added to the QRS or enhanced monitoring.
When items are added to the QRS, you need to work with trusts and health boards to make improvements. We will request updates on this process in the QRS.

Where it is difficult for you to make progress on an issue locally or where the issue is so serious, it may be necessary to refer it to our enhanced monitoring process (EM). In our enhanced monitoring process, when our thresholds are met, we work directly with you to improve the quality of training and reduce risk to patient/trainee safety. This usually means that we require more frequent updates (outside of, but in addition to, routine monitoring).

A GMC representative can also support you with any activities undertaken at the trust or health board to monitor the quality of training, either in person or virtually. We can also provide support from a group of associates who are medical experts.

If you have any queries about the QRS or enhanced monitoring process, please contact your regional QA programme manager.

**Service issues**

Some of the comments that respondents make may not relate specifically to medical training. Where comments do not specifically relate to training issues, the issues may still seriously affect the training environment and need to be addressed.

Where serious issues around service have been raised, it might be appropriate to share the comment with relevant health systems regulators, if it’s within their remit. It may also be appropriate to refer service issues to the enhanced monitoring process if progress cannot be made on the issue locally or if patient or doctor safety is seriously at risk. This enables us to support you by becoming more directly involved in investigations and monitoring.

Where you are resolving the problem locally or in collaboration with the local health systems regulator, you do not need to raise the issue to enhanced monitoring. Response option 6 should be used in these cases (see below).

**Responding to comments about issues already reported to the GMC**

Many concerns raised in the survey will be already being monitored, either through the QRS or through the enhanced monitoring process. Where this is the case, we are asking you to add the QRS item number or EM item number to the comment record.

**Responding to multiple comments about the same issue**

It may be that multiple comments are about the same issue. In this situation, you should only provide one single response to the issue, rather than responding to each comment individually. You will need to select one comment as the "parent" comment. For any additional comments linked to the parent comment, you can enter the parent comment ID in the appropriate field in the GMC Connect comments management area.
Comments relating to fitness to practice or professionalism concerns

If you identify a potential FTP or professionalism concern in the NTS comments (either a concern raised, or a concern about the person who's raised it), you should contact the Employer Liaison Adviser for their region to discuss the problem in the first instance.

Sharing and investigating comments

Where an investigation is required to verify the content of the comment or to gather further information, you may need to share the comments with local education providers (LEPs), colleagues within your deanery/local team, and other regulators.

The guiding principle is that comments should be shared to the extent required to assess the risk to patient and/or doctor safety. The way in which comments are investigated should ensure that the doctor raising the concern does not suffer any adverse consequences for doing so in good faith.

Sharing comments with local education providers

You should share all comments with the relevant LEP for information purposes. This can be either verbatim or as a summary.

A response from the LEP will not always be required. You should use your discretion to decide whether a response is necessary, based on whether the comment highlights new information about patient safety or the training environment.

Where a response is required, you should set the deadline for the LEP.

Further information

See the NTS documents page on our website for:

- Briefing note 4 annex A: Sharing patient safety and undermining comments with local education providers (LEPs)
- Briefing note 4 annex B: Frequently asked questions for local education providers (LEPs)

Respondent anonymity

It is important that doctors in training feel they can raise concerns made in good faith without suffering disadvantage or being reprimanded. However, in some cases it may be necessary to an investigation to know the identity of the doctor in training who makes a comment in the survey.

If it is necessary to an investigation, deaneries/local teams can ask us for the identity of the doctor who makes a comment. We’ll share this information with you and inform the respondent at the same time. To obtain this information, please contact the QA Monitoring and Improvement team at qamints@gmc-uk.org.
Making comments honestly and in good faith

We expect all doctors in training to make comments honestly and in good faith. You should proceed with investigations on the basis that doctors in training have made their comments in good faith, supporting their ability to raise concerns. In the exceptional circumstance that a respondent has acted in bad faith, you may need to consider whether the doctor’s fitness to practise is called into question.

Reviewing comments and feedback

Your responses will be quality assured by members of the regional quality assurance teams. They will consider whether appropriate action has been taken and will check for consistency across deaneries/local teams. Formal feedback will be provided in Autumn 2021.

Contact

- For GMC Connect access queries:

  NTS Team
  nts@gmc-uk.org

- To obtain respondent information:

  QA Monitoring and Improvement Team
  gamints@gmc-uk.org
Response map

You should use this response map in conjunction with the table below to respond. These response options are intended to ensure that the issues raised by doctors in training in the survey are reported on and monitored using the appropriate process.

Key

<table>
<thead>
<tr>
<th>Colour</th>
<th>Monitoring process</th>
</tr>
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<tbody>
<tr>
<td>Enhanced monitoring</td>
<td>QRS</td>
</tr>
<tr>
<td>Monitoring not required</td>
<td></td>
</tr>
</tbody>
</table>

Response 1
Continue routine monitoring and update the QRS

Response 2
Report on new information in the QRS

Response 3
Update the QRS item with the new information

Response 4
Report as a new item in the QRS

Response 5
Contact your regional team to refer the issue to EM

Response 6
Monitor through local processes

Response 7
No monitoring required. Provide explanation and closing statement

Comment received, reviewed by deanery/local team, triangulated with local evidence sources

Has the issue already been reported to the GMC?

Yes
No

Does the issue already been reported to the GMC?

Yes
No

Does the issue relate to an existing Enhanced Monitoring case?

Yes
No

Does the issue relate to an existing Enhanced Monitoring case?

Yes
No

Does the issue need to be referred to Enhanced Monitoring?

Yes
No

Has the issue already been reported to the GMC?

Yes
No

Does the issue relate to an existing QRS item?

Yes
No

Does the issue relate to an existing QRS item?

Yes
No

Does the issue require investigation or monitoring?

Yes
No

Does the issue require investigation or monitoring?

Yes
No

Has the issue already been reported to the GMC?

Yes
No

Does the issue meet your threshold to be added to the QRS?

Yes
No

Does the issue meet your threshold to be added to the QRS?

Yes
No

Does the issue relate to an existing QRS item?

Yes
No

Does the comment add any further information to an existing QRS item?

Yes
No

Does the comment add any further information to an existing QRS item?

Yes
No
# Response options for completing NTS comments responses

<table>
<thead>
<tr>
<th>Response option</th>
<th>Description</th>
<th>Deanery/LOCAL TEAM actions</th>
<th>GMC actions</th>
<th>Feedback</th>
</tr>
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</table>
| 1              | Existing QRS item, no further action | - the issue described is already known,  
- and the issue has already been reported in the QRS,  
- and the NTS comment adds no further information that suggests additional reporting may be required. | Enter QRS item number in the relevant response box. An update on the existing issue will be needed in the QRS. | We will cross reference the NTS comment with the existing QRS item. If this response option is appropriate, the deanery/Local team will continue to report in the QRS as normal. | If we think that the NTS comment requires additional reporting, we will include this in our feedback (the NTS comment will then be reported using response 2). We will check for this update in the QRS. If we do not think that the comment overlaps sufficiently with a known QRS issue, we will advise you and the comment will be treated as a new issue (either response 4, 5, or 6). |
| 2              | Existing QRS item, further action | - the issue described is already known,  
- and it has already been reported to us and is being monitored in the QRS,  
- **but** the NTS comment causes concern that the existing action plan for this issue may have fallen behind or been ineffective,  
- and the action plan can be brought back on track through local action. | Enter the QRS item number in the relevant response box. An update on the issue will be needed in the QRS.  
If the NTS comment increases the severity of the issue, you may need to escalate the issue to EM by contacting your regional quality assurance manager as soon as possible (response 5). | We will cross reference the NTS comment with the existing QRS item. If this response option is appropriate, we will update your QRS with details of the comment which indicate that the action plan in place for this issue has fallen behind or been ineffective. | We will check that the NTS comment links with the stated QRS item number.  
If we think the NTS comment does not link and should be a new QRS item number, we will inform you and the comment will then follow response 4.  
If the comment indicates that the issue may need to be escalated to EM we will contact you and the comment will then follow response 5. |
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<tr>
<td>3</td>
<td>Existing EM case</td>
<td>- the NTS comment relates to an existing enhanced monitoring case.</td>
<td>Enter enhanced monitoring item number in the relevant response box.</td>
<td>We will cross reference the NTS comment with the existing enhanced monitoring item. Our regional quality assurance teams may contact you to discuss whether any further immediate action is required.</td>
</tr>
<tr>
<td>4</td>
<td>New issue, QRS</td>
<td>- the issue described in the NTS comment has not been reported to us</td>
<td>Select this response and report on this issue in the QRS.</td>
<td>If the issue raised in NTS comment can be monitored routinely through the QRS, we will include the issue as a new item in your QRS. When we review the QRS we will check that you have reported on the NTS comment and the issue will continue to be monitored through the QRS.</td>
</tr>
<tr>
<td>5</td>
<td>New issue, EM</td>
<td>- the NTS comment describes an issue that has not already been reported to us</td>
<td>Please contact your regional quality assurance manager as soon as possible to discuss enhanced monitoring.</td>
<td>If the issue is escalated to the enhanced monitoring process the issue will then be monitored through the normal EM processes.</td>
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| 6 Monitor locally | ▪ the NTS comment describes a new issue that has not been reported to us  
▪ **but should not be monitored** via either the QRS or EM.  
This might be because:  
a) The issue does not meet the threshold to warrant monitoring through the QRS.  
b) The issue raised is known to the deanery/local team and will be dealt with locally | Use the notes area to describe why you think that the NTS comment should only be monitored locally. If relevant, include how the comment has been rag rated or share any action plans. | We will check whether we think your response is appropriate. We may request that items are added to the QRS if we feel that issues require additional monitoring. | If we think that this comment needs to be monitored via the QRS or EM or if we need further information, we may wish to place it on the QRS, or discuss the issue with you further. |
| 7 No monitoring required | ▪ The NTS comment is not a trainee or patient safety issue or a bullying and undermining issue.  
▪ The comment describes a service issue which has been referred to the relevant health systems regulator and it does not seriously affect trainee or patient safety.  
▪ The NTS comment does not contain enough information to be investigated  
▪ The issue has been resolved and does not require monitoring. | Use the notes area to describe why you think that the NTS comment should be closed. If relevant, include how the comment has been resolved or share any action plans. | We will check whether we think your response is appropriate. | If we think that this comment does need to be monitored via the QRS or EM or if we need further information, we may wish to place it on the QRS, or discuss the issue with you further. |