As part of their supporting evidence for revalidation, GPs will be required to collect feedback from patients and colleagues.

You must therefore seek feedback from your colleagues and patients at least once in every revalidation cycle and reflect on the feedback that you receive at appraisal.

**When do I need to collect the feedback?**

It makes sense to collect both sets of feedback at the same time, and several months before an appraisal so that the responses can be collated, reflected on and discussed at appraisal.

As this feedback must be collected at least once in every revalidation cycle, the urgency to request feedback for the first cycle of revalidation will depend on when your first revalidation recommendation is likely to be made by your Responsible Officer.

If you are due to be revalidated in Year 1 (April 2013 – March 2014) you should request feedback as soon as possible to ensure that it can be discussed at an appraisal before your recommendation is due to be made.

If you are to be revalidated in Year 2 (April 2014 – March 2015) or Year 3 (April 2015 – March 2016), you have a little more time to collect your feedback as you will be able to discuss your feedback at your 2013/14 appraisal.

If you would like to discuss your individual requirement, please contact Sarah Powell.

**Can I use feedback from questionnaires that I have completed previously?**

The GMC has released the below guidance on what feedback can be evidenced for your first revalidation cycle.

- Evidence of feedback from patients and colleagues must have been undertaken no earlier than five years prior to the first revalidation recommendation and be relevant to the doctor’s current scope of practice.

- Feedback from patients and colleagues that does not fully meet the criteria set by the GMC may also be included but must have been:
  - Focused on the doctor, their practice and the quality of care delivered to patients
  - Gathered in a way that promotes objectivity and maintains confidentiality

If at all possible, it would be most useful for you to request feedback from your peers and patients before your revalidation recommendation is due. However, if this is not possible for any reason it is acceptable to evidence feedback gathered in the five years prior to your revalidation.
If you choose to use feedback that has been gathered previously, please include this in your next appraisal and include written confirmation that it is relevant to your current scope of practice. Your appraiser will then be able to confirm whether this will indeed be appropriate for revalidation or recommend that you complete the process again if necessary.

Which questionnaires should I use?

In Essex, we are not stipulating particular questionnaires that GPs should use, but the questionnaires and the way that they are collected and summarised must meet the requirements laid out the GMC which can be found at: http://www.gmc-uk.org/Colleague_and_patient_questionnaires.pdf_44702599.pdf

Essex PCTs have funded the Clarity Appraisal Toolkit (appraisals.clarity.co.uk) until March 2015, and the electronic questionnaires available on this Toolkit are free for Essex GPs to use. The paper packs available for patient feedback are available for a cost of £35 + VAT (payable directly to Clarity). The questionnaires are those developed by the GMC and can be distributed and collated in the following ways:

**Peer Feedback**

Enter the email addresses of colleagues. A questionnaire will then be distributed to all and when the appropriate numbers of responses have been received by Clarity your feedback report will be made available to you via your Clarity log in.

**Patient Feedback**

Request a paper-based copy of the patient questionnaire via your log in and you will be sent a pack containing the questionnaires, instructions and freepost address for their return to Clarity. On receipt of the appropriate number of responses at Clarity, your questionnaires will be summarised and your feedback report will be made available to you via your log in.

Or

Enter the email addresses of patients. A questionnaire will then be distributed to all and when the appropriate numbers of responses have been received by Clarity your feedback report will be made available to you via your log in.

If you chose not to use Clarity to collect your feedback, there are a number of other systems you can use. The GMC questionnaires can be downloaded directly from: http://www.gmc-uk.org/doctors/revalidation/colleague_patient_feedback_resources.asp

The RCGP website (last accessed on 02.11.12) states that the RCGP currently recommends the following Colleague and Patient Questionnaire tools for the purposes of revalidation (in addition to the GMC questionnaires):

**Colleague Surveys**

- Sheffield Peer Review Assessment Tool Version 2 (GP-SPRAT)
- Colleague Feedback Evaluation Tool Version 2 (CFET)
- EDGECUMBE 360° Colleague Feedback
- 2Q MSF
Patient Surveys
- Improving Practice Questionnaire (IPQ)
- EDGECUMBE 360° Version 2
- Doctors' Interpersonal Skills Questionnaire (DISQ)
- Consultation Satisfaction Questionnaire (CSQ)

The website states that the assessment of these tools was based on the breadth of coverage by each tool (mapped to the GMC Framework) and the validation undertaken for each tool. Assessment was not based on the companies themselves, value for money or the method used for analysis and feedback. The full report can be accessed here.

How many questionnaires should I send out?

The number of responses required to give a fair interpretation of your responses will differ depending on the questionnaire used. Please refer to the instructions provided for your choice of questionnaire.

For the GMC questionnaire (used on the Clarity Appraisal Toolkit) the number of responses required to gain reliable feedback is 15 colleagues and 34 patients.

Before undertaking colleague feedback in a practice it is a good idea to brief members of the practice team so that they understand the purpose of the exercise. This can be particularly useful for encouraging comments which are specific and constructive.

Who should I ask for feedback?

You should ensure that the feedback reflects the whole scope of your practice – and so choose respondents that reflect the range of patients that you see and as wide a range of colleagues as possible. If you do work in other sectors, please ask your appraiser to highlight in the appraisal summary that have asked for feedback from your whole scope of work.

Remember that you can include colleagues and support staff who know you in any of your clinical roles e.g. undergraduate teaching, CCG work, GPwSI role or any other role including private or voluntary medical roles.

If you are having real difficulty identifying enough colleagues, please contact Sarah Powell for advice.

What happens if I don’t get enough responses?

The GMC Guidance states that:

'Research undertaken on the questionnaires recommends that a minimum of 34 completed patient questionnaires and 15 completed colleague questionnaires are required to obtain an accurate view of performance. Results are less reliable if these targets are not achieved, but it does not invalidate the activity.'

If at all possible, however, we would recommend that you try to increase your number of responses before your final report is issued. If you need more responses to the patient questionnaire, please hand out again to another group of consecutive patients to get the most reliable feedback.
If you are unable to get the required number of responses, or would like some advice about your individual circumstances, please contact Sarah Powell.

**Completing a Self-Assessment questionnaire**

You should also complete a self-assessment questionnaire which will be used to supplement the patient and peer feedback and should form part of your reflection on the feedback received.

Most questionnaire providers will offer this functionality as part of the process.

**Who can collate my feedback?**

The GMC guidance states that responses must be collated independently of the doctor, appraiser and Responsible Officer.

If you use Clarity or one of the questionnaire companies, they will collate your responses for you and provide you with an anonymous report.

If you hand out the hard copy GMC questionnaires yourself, the completed questionnaires should not be returned to you until they have been anonymised and summarised by a third party. You should bear in mind that the feedback will not be as useful if there is no comparative data.

**Reflecting on your feedback before your appraisal**

As well as including a copy of the feedback in your appraisal portfolio, your appraiser will be looking to see that you have reflected on the feedback received and the details of any actions you have taken/plan to take in response to it.

**Discussing your feedback at your appraisal**

Your reflection on your feedback and the discussion at appraisal should highlight good performance and help you to identify any areas where you may require further development.

Any identified areas for further development should help form your personal development plan and learning for the following year.

**Will negative feedback have an effect on my revalidation?**

Collecting feedback from your patients and colleagues gives you the opportunity to see how your practice is perceived by others. It is important that you reflect on your feedback – both positive and negative - and use this to consider how you can improve your practice.

It is human nature to focus on any negative comments made, but it important that you also acknowledge the positive comments made by your patients and colleagues. It may be useful to repeat the exercise again later in the revalidation cycle to evidence how you have changed your practice and check that your feedback has altered as a result.

Your responsible officer will not be making conclusions about your practice based on one single piece of supporting information, and so negative feedback will not result in you not being revalidated. But it is important that you reflect on the feedback and consider what changes that you may make to your practice as a result.
Useful links:

Colleague & Patient Feedback page on GMC website
http://www.gmc-uk.org/doctors/revalidation/colleague_patient_feedback.asp

Instructions for using the GMC Questionnaires

GMC FAQs for doctors using questionnaires
http://www.gmc-uk.org/FAQs_for_doctors_and_employers.doc_48332764.pdf

Guidance for appraisers on handling and interpreting MSF results

Contact details for further support before your appraisal:

It is expected that the vast majority of doctors will reflect on their feedback and then discuss these reflections at appraisal with their appraiser.

However, if you would like more immediate support when you receive your feedback, please contact Sarah Powell on sarah.powell4@nhs.net for the contact details of a local tutor who will be able to discuss your feedback with you.