



Regulating doctors Ensuring good medical practice

Briefing note 3 – Annex A Generic and demographic final questionnaire

The following pages contain the final questionnaire for generic (including Public Health trainees) and demographic questions for the 2015 National Training Survey. Each row represents an individual question (or the text on the page). The second column shows the question code.

Branching is shown in the final column. Alternative wording for Public Health trainees is shown in grey text.

Question number	Question	Answers	Area	Branching
	The survey will begin on the next page and is	made up of the following sections:		
	Opening section: A few questions about your	working arrangements.		
	Estimated time for completion: 1 minute.			
	Main section: Questions about your post.			
	Estimated time for completion: 10 minutes.			
	Academic section: If you are an academic training	nee there are some questions about your experiences as an academic.		
	Estimated time for completion: 5 minutes.			
	Programme section: Questions about your pro section.	ogramme (Foundation, Core Training or Specialty Training). A small numb	per of programmes h	have no questions in this
	Estimated time for completion: Between 1 and	d 5 minutes		
	Closing section			
	A few demographic questions and an opportu	nity for you to raise patient safety concerns.		
	Estimated time for completion: 2 minutes.			
	For most people the total time for completion	will be between 15 and 20 minutes.		
OPENQ11	Are you working less than full time?	Yes No	Demographi	ic

Question number	Question	Answers	Area	Branching
OPENQ09	How many hours per week are you contracted to work?	20 or less 21-30 31-40 41-48 49-56 More than 56	Demographic	
	In some weeks you may work more than 48 hours. However, please give your average over your post.			
OPENQ10	On average, how many hours per week do you ACTUALLY work in this post?	20 or less 21-30 31-40 41-48 49-56 More than 56	Demographic	
	In some weeks you may work more than 48 hours. However, please give your average over your post.			
	Thank you for completing the questions about your w	vorking arrangements. Click next to move to the	next section.	
Questions ab	out your post. Estimated time for completion: 10 minutes			
GENHQ02	Did you get all the information you needed about your workplace when you started working in this post?	Yes No Not sure 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 Not Applicable	Induction	
GENHQ04	How would you rate the quality of induction in this post? (This refers to your induction to the organisation in which you worked.)	Excellent Good Fair Poor Very poor	Induction	
GENHQ05	Did you have a designated educational supervisor (the person responsible for your appraisal) in this post?	Yes No Not sure	Educational supervision	
GENHQ06	Did you sit down with your educational supervisor and discuss your educational objectives for this post?	Yes No Not sure Not Applicable	Induction	
GENHQ07	In this post did you have a training/learning agreement with your educational supervisor, setting out your respective responsibilities?	Yes No Not sure Not Applicable	Educational supervision	
GENHQ91	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Educational supervision new	
	My educational supervisor would be helpful if I were to have any concerns that affect my training			
GENHQ92	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Educational supervision new	
	My educational supervisor is accessible should I need to contact them			

Question number	Question	Answers	Area	Branching
GENHQ93	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Educational supervision new	
	The level of input from my educational supervisor is appropriate for my training needs			
GENHQ08	In this post did you use a learning portfolio?	Yes No Not sure Not Applicable	Educational supervision	
GENHQ08	In this post did you use a learning portfolio/evidence folder? (Pharmaceutical Medicine only)	Yes No Not sure Not Applicable	Educational supervision	
GENHQ09	In this post were you told who to talk to in confidence if you had concerns, personal or educational?	Yes No Not sure Not Applicable	Educational supervision	
GENHQ94	Please state whether you agree or disagree with the following statement about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Educational supervision new	
	My educational supervisor's input into my e-portfolio is appropriate for my training needs			
GENHQ10	How would you rate the quality of teaching (informal and bedside teaching as well as formal and organised sessions) in this post?	Excellent Good Fair Poor Very poor	Overall satisfaction	
GENPQ10	How would you rate the quality of teaching (informal as well as formal and organised sessions) in this post? (Public Health only)	Excellent Good Fair Poor Very poor	Overall satisfaction	
GENPQ10	How would you rate the quality of teaching/coaching (informal as well as formal and organised sessions) in this post? (Pharmaceutical Medicine only)	Excellent Good Fair Poor Very poor	Overall satisfaction	
GENHQ15	In this post who provided the local/departmental teaching?	Other trainees without senior supervision Other trainees with senior supervision A mixture of both trainees and seniors Senior doctors Other e.g. Specialist Nurse	Local teaching	
GENPQ15	In this post who provided the local/departmental teaching? (Public Health only)	Other trainees without senior supervision Other trainees with senior supervision A mixture of both trainees and seniors Senior doctors Other e.g. specialist nurse	Local teaching	
GENHQ11	How would you rate the quality of this local/departmental teaching for this post?	Excellent Good Fair Poor Very poor	Local teaching	

Question number	Question	Answers	Area	Branching
GENHQ12	For how many hours per week was the local/departmental basis specialty-specific teaching provided in this post?	Less than 1 hr 1-2 hrs 2-4 hrs 5-8 hrs More than 8 hrs	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	Local teaching	
GENHQ14	When attending these local/departmental sessions in this post who covered your service work? (Please tick all the options that apply).	Not covered Designated trainee who would otherwise attend teaching Designated trainee who would not attend teaching anyway Designated senior doctor Nurse specialist Other	Local teaching	
GENHQ16	In this post, was specialty-specific teaching provided on a deanery/regional/school wide basis?	Yes - all of it Yes - most of it No	Regional teaching	"Yes - all of it" and "Yes - most of it" branch to GENHQ17, "No" branches to GENHQ20
GENHQ17	In this post how frequently was this deanery/regional/school specialty-specific teaching provided?	Weekly Fortnightly Monthly Bi-monthly Less frequently	Regional teaching	
GENHQ18	Were you able to attend these whilst in this post?	Yes, every time Yes, most of the time Yes, some of the time No Not applicable - none have taken place yet	Regional teaching	
GENHQ19	How would you rate the quality of this deanery/regional/school specialty-specific teaching for this post?	Excellent Good Fair Poor Very poor	Regional teaching	
GENHQ20	Overall, how would you rate the educational resources available to you in this post?	Very good Good Neither good nor poor Poor Very poor Not applicable	Access to educational resources	
GENHQ21	How good or poor was access to each of the following in your post? Library	Very good Good Neither good nor poor Poor Very poor Not applicable	Access to educational resources	
GENHQ22	How good or poor was access to each of the following in your post? Online journals	Very good Good Neither good nor poor Poor Very poor Not applicable	Access to educational resources	
GENHQ23	How good or poor was access to each of the following in your post? E-learning resources	Very good Good Neither good nor poor Poor Very poor Not applicable	Access to educational resources	

Question number	Question	Answers	Area	Branching
GENHQ24	How good or poor was access to each of the following in your post?	Very good Good Neither good nor poor Poor Very poor Not applicable	Access to educational	
	Internet access		resources	
GENHQ25	How good or poor was access to each of the following in your post?	Very good Good Neither good nor poor Poor Very poor Not applicable	Access to educational	
	Space for private study		resources	
GENHQ26	How good or poor was access to each of the following in your post?	Very good Good Neither good nor poor Poor Very poor Not applicable	Access to educational	
	Equipped rooms for group teaching		resources	
GENHQ27	How good or poor was access to each of the following in your post?	Very good Good Neither good nor poor Poor Very poor Not applicable	Access to educational	
	Simulation facilities		resources	
GENHQ50	In this post how would you rate the encouragement you had to take study leave?	Excellent Very good Good Neither good nor poor Poor Very poor	Study leave	
GENHQ51	In this post were you able to access funds to cover the cost of all courses that were recommended for you to complete?	Yes No Not Applicable	Study leave	
GENHQ52	Were any days subtracted from your study leave allowance for compulsory training in this post (in or out of hospital)?	Yes No Don't know	Study leave	
GENPQ52	Were any days subtracted from your study leave allowance for compulsory training in this post? (Public Health and Pharmaceutical Medicine only)	Yes No Don't know	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	
GENHQ28	How often did you have informal feedback from a supervisor/public health consultant/senior colleague on how you were doing in this post?	Daily Weekly Monthly Rarely Never	Feedback	
GENHQ28	How often did you have informal feedback from a supervisor/public health consultant/senior colleague on how you were doing in this post? (Public Health only)	Daily Weekly Monthly Rarely Never	Feedback	

Question number			Area	Branching
GENHQ28	How often did you have informal feedback from a supervisor/pharmaceutical medicine consultant/senior colleague on how you were doing in this post? (Pharmaceutical Medicine only)	Daily Weekly Monthly Rarely Never	Feedback	
GENHQ29	Did you have a formal meeting with your supervisor to talk 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		Feedback	
GENHQ30	Did you have a formal assessment of your performance in the workplace 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	
GENHQ95	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Handover new	
	Handover arrangements in this post BETWEEN SHIFTS ensure continuity of care for patients			
GENHQ96	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Handover new	
	Handover of patients BETWEEN DEPARTMENTS in this post ensures continuity of care			
GENHQ97	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Handover new	
	Appropriate members of the multidisciplinary team are included in handover			
GENHQ31	In this post, which of the following best describes handover arrangements BEFORE night duty?	Not applicable An organised meeting of doctors and nurses An organised meeting of doctors Phone or email communication Informal No arrangements	Handover	
GENHQ32	In this post, which of the following best describes handover arrangements AFTER night duty?	Not applicable An organised meeting of doctors and nurses An organised meeting of doctors Phone or email communication Informal No arrangements	Handover	
GENHQ33	How would you rate the intensity of your work, by day in this post?	Very light Light About right Heavy Very heavy	Workload	
GENHQ34	How would you rate the intensity of your work, by night in this post?	Not applicable Very light Light About right Heavy Very heavy	Workload	

Question number	Question	Answers	Area	Branching
GENHQ98	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Workload new	
	The working PATTERN in this post allows me enough sleep so that I can safely manage my patients			
GENHQ99	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable	Workload new	
	The work INTENSITY in this post allows me to safely manage my patients			
GENHQ35	In this post, how often have you worked beyond your rostered hours? (excl. Pharmaceutical Medicine)	Daily Weekly Monthly Rarely Never	Workload	
GENHQ35	In this post, how often have you worked beyond your contracted hours? (Pharmaceutical Medicine only)	Daily Weekly Monthly Rarely Never	Workload	
GENHQ61	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?	Never Once More than once	Demographic	
GENHQ36	In this post, how often did your working pattern leave you feeling short of sleep when at work?	Daily Weekly Monthly Rarely Never	Workload	
GENHQ37	In this post did you always know who your available senior support was during on call health protection?	Yes and they were accessible Yes, but they were not easy to access No, but there was usually someone I could contact No, there was no one I could contact Not applicable	Clinical supervision	
GENPQ37	In this post did you always know who your available senior support was during on call health protection? (Public Health only)	Yes and they were accessible Yes, but they were not easy to access No, but there was usually someone I could contact No, there was no one I could contact Not applicable	Clinical supervision	
GENHQ38	In this post how often, if ever, were you supervised by someone who you felt wasn't competent to do so?	Daily Weekly Monthly Rarely Never	Clinical supervision	
GENHQ39	In this post how often did you feel forced to cope with clinical problems beyond your competence or experience?	Daily Weekly Monthly Rarely Never	Clinical supervision	
GENPQ39	In this post how often did you feel forced to cope with problems beyond your competence or experience? (Public Health only)	Daily Weekly Monthly Rarely Never	Clinical supervision	

Question number	Question	Answers	Area	Branching
GENHQ40	In this post how often have you been expected to obtain consent for procedures where you feel you do not understand the proposed interventions and its risks?	Daily Weekly Monthly Rarely 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	Clinical supervision out of hours	'Yes' branches to GENHQ71
GENHQ71	In this post, OUT OF HOURS, did you always know who was providing your clinical supervision when you were working?	Yes and they were accessible Yes, but they were not easy to access No, but there was usually someone I could contact No, there was no one I could contact Not applicable	Clinical supervision out of hours	
GENHQ72	In this post, OUT OF HOURS, how often, if ever, were you clinically supervised by someone who you felt wasn't competent to do so?	Daily Weekly Monthly Rarely Never	Clinical supervision out of hours	
GENHQ73	In this post, OUT OF HOURS, how often did you feel forced to cope with clinical problems beyond your competence or experience?	Daily Weekly Monthly Rarely Never	Clinical supervision out of hours	
GENHQ74	In this post, OUT OF HOURS, how often have you been expected to obtain consent for procedures where you feel you do not understand the proposed interventions and its risks?	Daily Weekly Monthly Rarely Never Not applicable	Clinical supervision out of hours	
GENHQ75	How would you rate the quality of clinical supervision, OUT OF HOURS, in this post?	Excellent Good Fair Poor Very poor	Clinical supervision out of hours	
GENHQ78	Please state whether you agree or disagree with the following statement about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment	
	In general, the working environment is a supportive one.			
GENHQ79	Please state whether you agree or disagree with the following statement about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment	
	Staff, including doctors in training, are treated fairly.			
GENHQ80	Please state whether you agree or disagree with the following statement about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment	
	Staff, including doctors in training, treat each other with respect.			

Question number	Question	Answers	Area	Branching
GENHQ81	Please state whether you agree or disagree with the following statement about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment	
	The working environment is one which helps build the confidence of doctors in training.			
GENHQ82	Please state whether you agree or disagree with the following statement about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Supportive environment	
	If I were to disagree with senior colleagues, they would be open to my opinion.			
GENHQ47	How often, if at all, have you been the victim of bullying and harassment in this post?	Every day At least once per week At least once per fortnight At least once per month Less often than once per month Never Prefer not to answer	Undermining	
GENHQ48	How often, if at all, have you witnessed someone else being the victim of bullying and harassment in this post?	Every day At least once per week At least once per fortnight At least once per month Less often than once per month Never Prefer not to answer	Undermining	
GENHQ49	In this post, how often if at all, have you experienced behaviour from a consultant/GP that undermined your professional confidence and/or self esteem?	Every day At least once per week At least once per fortnight At least once per month Less often than once per month Never Prefer not to answer	Undermining	

Question number	Question	Answers	Area	Branching
	Raising written bullying/underminir	ng concerns about your training post	Bullying and	
	What is the process?		undermining	
	1. We require that all concerns will be inv	vestigated by your deanery/LETB (LETB is the name for deaneries in England).		
	2. To investigate your comment, we will	share the following with your deanery/LETB:		
	Your verbatim comment			
	• Your training site			
	Your post specialty			
	Your programme specialty			
	Your training level			
	3. The deanery/LETB will liaise directly w undertake a thorough investigation, as a	ith the organisation/trust you are working for (your employer), in order to opropriate.		
	4. We check each deanery/LETB respons	e, to ensure that we are satisfied with the outcome.		

Answers

Am I guaranteed anonymity?

No.

Your individual answers to the multiple choice questions in the survey will always remain confidential.

Concerns about bullying/undermining 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 of the importance of ensuring a safe training environment, this is subject to three exceptions.

Firstly, as explained above we will share your verbatim comment and other information about you with your deanery/LETB 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/LETB 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 of the importance of addressing any issues that can create an unsafe training environment. We will inform you before we do this.

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 will inform you before 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.

We will share comments with appropriate regulatory bodies where there is a legitimate need to do so

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.

Raising concerns about a doctor's fitness to practise

It is not appropriate to raise concerns about a doctor's fitness to practise here in the national training survey. Your comment in the survey is not a fitness to practise referral. If your concern is about the fitness to practise of a doctor, please see the <u>guidance on raising concerns on our website</u>, where you can also find details of our confidential helpline.

branches to GENHQ100	GENHQ84	Do you wish to raise a bullying or undermining concern here?	Yes No	Bullying and undermining	
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Question number	Question	Answers	Area	Branching
GENHQ85	Your bullying or undermining concern	Free text	Bullying and undermining	
	Please use the text box below.			
	Your comment will be taken seriously and investigated. This means that it is your responsibility to:			
	 write factually and accurately about your own experience, not hearsay 			
	describe specific incidents			
	describe specific behaviours			
	Please note there is a limit of 2,000 characters within the box. If you exceed the limit, you will encounter an error message.			
	Once finished, please use the categorisation questions below.			
GENHQ87	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 (please specify)	Bullying and undermining	
GENHQ88	If you selected 'other' please provide a description.	Free text	Bullying and undermining	
GENHQ89	Which behaviour types describe your concern? (Please select all that apply)	Belittling or humiliation Threatening or insulting behaviour Deliberately preventing access to training Bullying relating to a protected characteristic Other (please specify)	Bullying and undermining	
GENHQ100	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Reporting systems	
	I have been made aware of how to report patient safety incidents and near misses			
GENHQ101	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Reporting systems	
	There is a culture of proactively reporting concerns			

Question number	Question	Answers	Area	Branching
GENHQ102	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Reporting systems	
	There is a culture of learning lessons from concerns raised			
GENHQ103	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree N/A (not aware of any concerns being raised)	Reporting systems	
	I am confident that concerns are effectively dealt with			
GENHQ104	Please state whether you agree or disagree with the following statements about your post:	Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree N/A (not aware of any concerns being raised)	Reporting systems	
	When concerns are raised, the subsequent actions are fed back appropriately			
GENHQ54	How would you rate the quality of clinical supervision in this post? (excl. Public Health and Pharmaceutical Medicine)	Excellent Good Fair Poor Very poor	Overall satisfaction and Clinical supervision	
GENPQ54	How would you rate the quality of supervision in this post? (Public Health and Pharmaceutical Medicine only)	Excellent Good Fair Poor Very poor	Overall satisfaction and Clinical supervision	
GENHQ55	How would you rate the quality of experience in this post?	Excellent Good Fair Poor Very poor	Overall satisfaction	
GENHQ56	How would you rate the practical experience you were receiving in this post?	Excellent Good Fair Poor Very poor	Adequate experience	
GENHQ57	How confident are you that this post will help you acquire the competencies you needed at that particular stage of your training?	Very confident Fairly confident Neutral Not very confident Not at all confident	Adequate experience	
GENHQ58	How would you describe this post to a friend who was thinking of applying for it?	Excellent Good Fair Poor Very poor	Overall satisfaction	
GENHQ59	How useful do you feel this post will be for your future career?	Very useful Useful Fairly useful Not very useful Useless	Overall satisfaction	

Question number	Question	Answers	Area	Branching
GENHQ76	Which, if any, of the following academic trainee roles do you currently hold?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.	I am not an academic trainee Academic Foundation Trainee (AFT) NIHR Clinical Lecturer - England (NIHR funding) (CL) Clinical Lecturer - England (other funding), Wales (CL) Clinical Lecturer - Scotland Academic Clinical Lecturer - Northern Ireland (ACL) NIHR Academic Clinical Fellow - England (NIHR funding) (ACF) Academic Clinical Fellow - England (other funding), Wales, Northern Ireland (ACF) Clinical Research Fellow - Scotland Clinical Teaching Fellow - Scotland Other academic role	Academic	"I am not an academic trainee" branches to programme specific questions, if applicable, all other answers branch to GENHQ77.
GENHQ77	Have you used your protected research time to undertake research in the last 12 months?	Yes No	Academic	"Yes" branches to academic questionnaire, "No" branches to programme specific questions.
	Thank you for completing the questions about your post. Click	next to move to the next section.		
Closing quest	tions. Estimated completion time: 2 minutes			
CLSGQ02	We would appreciate your help in completing the following Equality and Diversity Monitoring questions. Any answers you give will be used to help us to fulfil our statutory duties and our responsibilities under the Equality Act 2010. For example, your information will help us regulate medical education and training and ensure progression through GMC approved training programmes is fair and free from discrimination. We will aggregate and anonymise any information we publish so that your answers cannot be identified. What is your ethnic group?	White - English/Welsh/Scottish/Northern Irish/British White - Irish White - Gypsy or Irish Traveller White - Any other White background (please write in) Mixed/Multiple ethnic groups - White and Black Caribbean Mixed/Multiple ethnic groups - White and Black African Mixed/Multiple ethnic groups - White and Asian Mixed/Multiple ethnic groups - Any other Mixed/multiple ethnic background (please write in) Asian/Asian British - Indian Asian/Asian British - Pakistani Asian/Asian British - Bangladeshi Asian/Asian British - Chinese Asian/Asian British - Any other Asian background (please write in) Black/African/Caribbean/Black British - African Black/African/Caribbean/Black British - Any other Black/African/Caribbean/Black British - Any other Black/African/Caribbean background (please write in) Other ethnic group - Arab Other ethnic group - Any other ethnic group (please write in) Prefer not to say	Demographic	"Other ethnic group – Any other ethnic group (Please write in)" branch to CLSGQ03, all others branch to CLSGQ50?

Question number	Question	Answers	Area	Branching
CLSGQ03	Ethnicity description. If you selected 'other' please provide a description of your ethnicity.	Free text	Demographic	
CLSGQ50	Are you disabled?	Yes No Don't know Prefer not to say	Demographic	
CLSGQ51	Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?	Yes, limited a lot Yes, limited a little No Prefer not to say	Demographic	"Yes, limited a lot" and "Yes limited a little" branch to CLSGQ05, "No" and "Prefer not to say" branch to CLSGQ25
CLSGQ05	In this post, do/did you require adjustment(s) to be made so you can carry out your work?	Yes No	Demographic	"Yes" branches to CLSGQ06, "No" branches to CLSGQ25
CLSGQ06	Have any adjustment(s) been made so you can carry out your work in this post?	Yes - all adjustments have been made Yes – some adjustments have been made but not all of them No – the adjustments I need have not been made	Demographic	"Yes - all adjustments have been made Yes – some adjustments have been made but not all of them" branches to CLSGQ07?
CLSGQ07	Please insert any comments you have about the adjustments you require.	Free text	Demographic	

Question number	Question	Answers	Area	Branching		
CLSGQ75	Patient Safety		Patient safety			
	You now have an opportunity to raise any patient safety concerns ab	out your post.				
	All doctors have a duty to act when they believe patient safe comfort is being compromised. This includes raising concern					
	The organisation where you are currently working may be th to raise the concern and this should be your first consideration		u			
	What is the process?					
	1. We require that all concerns raised in your response to this questic (LETB is the name for deaneries in England).	on should be investigated by your deanery/LETB				
	2. To investigate your comment, we will share the following with you	r deanery/LETB:				
	Your verbatim comment					
	Your training site					
	Your post specialty					
	Your programme specialty					
	Your training level					
	3. The deanery/LETB will liaise directly with the organisation/trust yo investigation, as appropriate.	u are working for, in order to undertake a thorough				
	4. We check each deanery/LETB response, to ensure that we are sat	isfied with the outcome.				

Question number	Question	Answers	Area	Branching
CLSGQ88	Am I guaranteed anonymity?			
	No.			
	Your individual answers to the multiple cho	ice questions in the survey will always remain confidential.		
	1 5 5	e within the survey will also be treated as confidential, and will not be AC's Education Directorate. However, because patient safety must cor		

1. Firstly, as explained above we will share your verbatim comment and other information about you with your deanery/LETB 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/LETB 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. We will inform you before we do this.

- 2. 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 will inform you before 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.
- 3. We will share comments with appropriate regulatory bodies where there is a legitimate need to do so.

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.

CLSGQ90 Raising concerns about a doctor's fitness to practise

It is not appropriate to raise concerns about a doctor's fitness to practise here in the national training survey. Your comment in the survey is not a fitness to practise referral. If your concern is about the fitness to practise of a doctor, please see the <u>guidance on raising concerns on our website</u>, where you can also find details of our confidential helpline.

Question number	Question	Answers	Area	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 end of survey, "Yes, and they have not yet been addressed" branches to additional guidance on page 45.

Patient safety

What to include in your comment

Please include in your comment (as appropriate):

- a clear description of the incident or process giving rise to the risk, including location (for example: 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 believe would secure the safety of patients

When finished, please answer the questions below.

Please note there is a limit of 2,000 characters within the box. If you exceed the limit, you will encounter an error message.

[free text]

CLSG78

CLSGQ63	If you work across multiple sites please tell us the Trust and/or 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	'Yes' branches to next question

Question	Answers	Area	Branching
Who was the patient safety concern reported to?	My employer My deanery/LETB GMC Another body Don't know	Patient safety	
Thank you for raising a patient safety concern		Patient safety	
 We will not automatically share your identity, but we will tell the level to help locate the concern The deanery/LETB will liaise directly with the organisation you investigation, if one is necessary. In some cases we will need to tell your deanery/LETB and you thorough investigation of the problem. If we do this, we will be You can read more about what happens to concerns raised in the survey. 	hem your training site, post specialty and training a are training in, in order to undertake a thorough ar placement provider who you are to enable a bet you know by email.		
We keep a list of doctors who are interested in helping us develop improvements to the survey. From time to time we contact people on this list and invite them to comment on our work. This might be at a meeting or an event, in a phone call or to simply read something we send in an email. There is of course no obligation for people on the list to participate, and you can be removed from the list upon request. If you're interested in helping us develop the survey, and you want to be on our list of contacts for this purpose, please select the appropriate response below.	Yes, please add me to the list No thanks		
	 Who was the patient safety concern reported to? Thank you for raising a patient safety concern The safety of patients is our first concern and we will now work with y (LETB) and post provider to review the information you have provided Next steps We will share your verbatim comment with your deanery/LETI We will not automatically share your identity, but we will tell the level to help locate the concern The deanery/LETB will liaise directly with the organisation you investigation, if one is necessary. In some cases we will need to tell your deanery/LETB and you thorough investigation of the problem. If we do this, we will keep a list of doctors who are interested in helping us develop improvements to the survey. From time to time we contact people on this list and invite them to comment on our work. There is of course no obligation for people on the list to participate, and you can be removed from the list upon request. If you're interested in helping us develop the survey, and you want to be on our list of contacts for this purpose, please select the appropriate 	Who was the patient safety concern reported to? My employer My deanery/LETB GMC Another bdy Don't know Thank you for raising a patient safety concern The safety of patients is our first concern and we will now work with your deanery/local education and training board (LETB) and post provider to review the information you have provided and investigate the problem where appropriate. Next steps • We will share your verbatim comment with your deanery/LETB within five working days. • We will not automatically share your identity, but we will tell them your training site, post specialty and training level to help locate the concern • The deanery/LETB 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/LETB and your placement provider who you are to enable a thorough investigation of the problem. If we do this, we will let you know by email. You can read more about what happens to concerns raised in the survey on our website and for more information about confidentiality please read our data protection notice. We keep a list of doctors who are interested in helping us develop inprovements to the survey. From time to time we contact people on this list and invite them to comment our work. This might be at a meeting or an event, in a phone call or to simply read something we send in an email. There is of course no obligation for people on the list to participate, and you can be removed from the list upon request. If yourre interested in helping us develop the survey, and you want to be on our list of contacts	Who was the patient safety concern reported to? My employer My deanery/LETB GMC Another bdy Dan't know Patient safety Thank you for raising a patient safety concern Patient safety Patient safety The safety of patients is our first concern and we will now work with your deanery/local education and training board (LETB) and post provider to review the information you have provided and investigate the problem where appropriate. Patient safety Next steps We will share your verbatim comment with your deanery/LETB within five working days. We will not automatically share your identify, but we will tell them your training site, post specialty and training level to help locate the concern The deanery/LETB 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/LETB and your placement provider who you are to enable a thorough investigation of the problem. If we do this, we will let you know by email. You can read more about what happens to concerns raised in the survey on our website and for more information about confidentiality please read our data protection notice. We keep a list of doctors who are interested in helping us develop improvements to the survey. From time to time we contact people on this list and invite them to comment on our work. This might be at a meeting or an event, in a phone call or to simply read something we send in an email. There is of course no obligation for people on the list to participate, and you can be removed from the list upon request. If yourre interested in helping us develop the survey, and you want to be

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