How can the trainees help the trainers?

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Introduction

Feedback can be defined as providing information to a particular service which can later be used for the improvement of that service. Within the NHS, feedback plays a major role in making vital changes to help with patient safety and education. Currently, clinical and educational supervisors are required to provide feedback regarding their trainees. However, there is no reciprocal arrangement for the trainees to provide feedback to their trainers. Junior doctors receive ongoing feedback during their training to highlight areas of excellence and areas where they can improve. Consultants usually receive feedback from other consultants, patients and managers; however, there is no formal process in place for trainees to provide feedback to their trainers.

This project was designed to enable junior doctors to provide anonymous feedback to their consultants on how they teach and train their junior doctors on and off the wards, their interactions with other co-workers, and to give the opportunity for constructive feedback.

Materials and methods

An anonymous consultant survey was created which consisted of 10 questions of which eight related to the consultant, one question allowed additional free comments to be made and one identified the grade of the doctor completing the survey. The survey was set up and run over a period of 8 weeks during which the junior doctors were able to fill out the survey any number of times and for any number of consultants with whom they had trained. The survey provided quantitative and qualitative analysis which was fed back to the appropriate consultant.

Results and discussion

At the end of the 8-week survey period, 30 responses were received and the data was collected and analysed. Of the 30 responses, 18 consultants were given feedback, and each consultant had 1–4 responses. The total number of responses were plotted onto a graph and an average response was highlighted for each question. Each consultant was then provided with these graphs, along with full results from the questionnaire, highlighting their average response against the overall average.

The results were varied. Most consultants received above average responses and positive feedback. Some consultants received average responses and a few received below average feedback.

Conclusion

The aim of this project was to obtain and provide medical consultants, especially the trainers, with feedback on how they perform on and off the wards as well as their engagement in teaching and training. This feedback system would be useful for the consultant's personal development and their annual appraisals, as well as improvement in trainee education.

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