

Are you worried about providing honest MSF feedback?

You may find it difficult to provide honest MSF feedback because:

- You are worried that the other person will not like you
- You think that the other person cannot handle the feedback
- You have had previous experiences where someone was annoyed when you provided feedback
- You don't want to take the risk

Sometimes a person receiving feedback feels like it was unjustified. This can be because the reasons for the feedback weren't explained and no solutions were offered. If your feedback is truly trying to help someone to improve then the way it is written will make it easier for your GP colleague to focus on the message it is trying to convey.

Think about your anonymity!

Do not discuss the ratings or the comments you provide with your colleagues. Think about how you would feel if someone did this to you.

Think about how the comments you write will affect your anonymity. If you write, "We are the only people in the practice on Tuesday afternoons and I find her very supportive and easy to approach at this time" then your colleague will probably know that you wrote this comment!

You need time to think about the questions and fill in the questionnaire so that it is useful for your colleague. Make sure that you have privacy to fill in the questionnaire. The questionnaire takes about 10 minutes to complete so make sure you have time set aside to do this.

If you are worried about providing feedback you can access our **RATER HELPLINE** on 0141 223 1469 or emailing diane.kelly@nes.scot.nhs.uk



COLLEAGUE MULTI-SOURCE FEEDBACK

INFORMATION FOR RATERS

Have you been asked to provide feedback for a colleague but aren't sure how to rate them...or what to write?

Here are some tips!

What is the purpose of colleague multi-source feedback?

Doctors take part in colleague multi-source feedback (MSF) for different reasons.

Feedback can help teams to learn how to work together. One reason for doctors to take part in MSF is to provide them with feedback from different people about different areas of their work. Knowing areas where work is highly valued and areas to concentrate on developing can help with team working and can allow the doctor to plan future learning.

Another purpose of multi-source feedback is to provide evidence that the doctor is working well with colleagues. Multi-source feedback may become compulsory for doctors as part of Revalidation. All doctors will have to take part in revalidation.

What will happen to the feedback I provide?

The feedback you provide will be collected together with feedback from other colleagues and used to create a feedback report. The report consists of average scores and free text comments copied exactly as you have typed them. The report will be read by your colleague and by their appraiser and then discussed during the appraisal meeting. It might be used for their revalidation. The final report is confidential and anonymous.

It is quite scary to ask your colleagues for anonymous feedback. How many of us hope that our colleagues like to work with us? How many of us would feel scared about our colleagues giving us anonymous feedback? **KEEP THIS IN MIND!**

How do I fill in the multi-source feedback rating scales?

Rating scales are used in multi-source feedback to get information about a range of work carried out by your colleague. Rating scales can give inaccurate results when you aren't sure how to use them.

When we use rating scales some people ALWAYS mark 4 out of 6 when they think something is excellent. Others mark 6 out of 6 when

They think something is just adequate. If you are in either of these groups think about how you change your ratings to tell someone that something is excellent or adequate

When we use rating scales some people will generalise about behaviour to areas where they really haven't observed how the person behaves. You should tick the "don't know" box if you have not had to ask your GP colleague something and can't comment on whether they "respond to requests in a timely way". This will ensure the feedback is a true reflection of your colleague's behaviour.

How do I fill in the multi-source feedback comments boxes?

Think about the feedback comments you make and how they will make your colleague react. Comments are useful to help your colleague get more specific information about where they are doing well and where they could improve. This will make it easier for your colleague to improve how they work with you.

Feedback is not the same as criticism. Criticism is an unprepared judgment of another person or their work. Criticism might make someone feel angry and does not help a person to solve the problem.

Good written feedback comments:

- Are written as your personal opinion.
- Give the person a description of the specific behaviour that you have observed
- Balance complimentary feedback with feedback that offers solutions

"I think you are very good at taking time to listen to other people's views and are very up to date with the latest evidence. I think there have been one or two times when you didn't talk through what you are doing and why you were doing it with patients. I think that this sometimes meant that other colleagues didn't understand the management plan you had for the patient and found it more difficult to contribute to the patient's management. I think it might be good if you were to spend a minute explaining things a bit more thoroughly and this might help colleagues to contribute a bit better."