

Distribution Guidelines for Unit Staff

Thank you for supporting your colleague in undertaking the PaedCCF feedback process.

Please take the opportunity to ask the participating doctor any questions you may have about how distribution of weblinks/paper forms works, as this will help the process run smoothly.

We recognise that it may be necessary to modify some elements of the guidance, depending on the way that your clinical service is organised. Please discuss this with the participating doctor if you feel adaptations may be helpful.

- 1. The doctor has been issued with a tear-off sheet of unique weblinks which connect to an online feedback form or with blank paper forms and white instruction envelopes to pass on to parents/carers, in order to gather feedback. The doctor will have chosen whether weblinks or paper forms are more suitable for their patients. To achieve an adequate and reliable response rate, 40 returned responses are recommended from the parents/carers of their patients (not those treated by doctors under their supervision).
- 2. The weblink or a paper form/instruction envelope should be offered to the parent/carer of every patient by a member of the unit team, most likely by a member of the nursing staff. Do not attempt to randomise patients. Each unit should discuss the best way for this to happen. It is important that the consultant or SAS doctor is not responsible for offering the form to parents.
- 3. A weblink or paper form and white envelope should be given to each parent/carer the doctor meets during the agreed period, whether or not they have met them before (although not if the parents/cares have previously given their feedback). Do not attempt to randomise patients.
- 4. The overall process runs for up to twelve months. Within this timeframe the doctor may, for example, ask for weblinks/forms to be distributed over a number of 1 week periods of service. The weblink/form should be issued to parents/carers until at least 50 have been issued. It is important that you remember to continue to hand out weblinks/forms to parents/carers, so that the doctor achieves a good response rate.
- 5. Decisions about which meetings/consultations to include are best taken at local unit level. However meetings away from the bedside, either at initial admission or for later updating may be more suitable. Meetings including the child, where appropriate, are encouraged to enable them to contribute their views if able to. The participating doctor will talk through this aspect with you.
- 6. Parents/carers should not be selected on any basis other than their willingness to provide feedback.
- 7. **Weblinks**: if a unit has access to in-house tablets/iPads, unit staff may enter the weblink into the tablet browser and allow the parent/carer to give feedback as soon as the meeting has finished. Otherwise, the parents/patient can enter the link into their own mobile device at a time convenient to them.
- 8. **Paper forms**: parents/carers should be encouraged to complete the form and to hand it back to unit staff (sealed in the envelope) after the meeting. Simple instructions are printed on the envelope explaining the purpose of the form. It may be helpful to keep a clearly-marked box in a prominent location for collection of forms at times when unit



staff are not available. Returned forms should be kept in a secure location, before being returned to RCPCH in batches.

- The doctor should not be aware of which families have been given forms as this could modify their behaviour in meetings. Management of this aspect will depend on local arrangements, so please discuss with your colleague before starting the process.
- 10. Some doctors/those supporting them have found it helpful when using paper forms to mark the white instruction envelopes with the name or initials of the doctor in question.
- 11. Some have also displayed a small headshot photo, so the parent/carer knows who they are giving feedback on.
- 12. Please positively encourage parents/carers to complete the form, emphasising the importance of improving the care and service they receive. However, if the parent/carer refuses, they should not be forced to participate.
- 13. The parent/carer may need assistance in completing the weblink/form (literacy issues, or not an English language speaker non-English language forms are not available). Where this appears to be the case, please help them get this assistance. Someone independent of the unit would be best to help the parent complete the form, where possible, in order to provide reassurance about the anonymity of their feedback.
- 14. Some questions in the weblink/on the paper form may not be relevant, in which case please advise the parent/carer to use the N/A (not applicable) option.
- 15. If they ask, parents should be advised that ethnicity information requested on the form is used to undertake further analysis of results to determine if the tool is able to gather validated, unbiased feedback. Should a parent/carer not wish to provide this data, they do not have to.
- 16. Should a parent/carer raise a serious concern following their consultation, they should be directed to, for example, PALS and advised how to raise concerns in confidence. The form is not the place for reporting serious concerns. Please follow local procedures if a parent wishes to do this.
- 17. **Paper forms**: if for any reason a parent/carer cannot complete and hand in the form before leaving, provide them with one of the small, brown freepost envelopes (also included in the doctor's pack) and ask them to post the form directly to the RCPCH or use the weblink on the top of the form to provide their feedback electronically.
- 18. Completed paper forms (in envelopes) should be kept in a safe place decide the best method for your setting until a reasonable quantity (at least 15 forms) has been collected. Either you or the doctor should then place forms in one of the large plastic RCPCH- addressed envelopes (included in the pack if paper forms are being used) and post back to the RCPCH. Postage costs will need to be covered by the doctor's organisation.