

Reinventing Feedback: The rise of an Integrated Education Quality Platform

Dr Martin Schmidt
Head of School for KSS

Royal College of Psychiatrists Medical Education Conference

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Permission to take images of slides

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Views expressed in my presentation are my own and are not a reflection of RCPsych stance or policy

Conflicts of interest disclosure

I have no financial relationships or conflict of interest to declare.

I helped develop the Feedback system I will be talking about but hold no shares or commercial interests in it.

Other providers exist or you can develop your own!

Overview

This session will explore how a simple end-of-placement survey developed into a robust platform that tracks post quality, delivers MSF feedback, highlights supervisors who may benefit from additional support, and provides comprehensive data to guide responses to GMC and NETS findings, quality visits, and emerging educational concerns—ultimately strengthening the training environment

Trainee Feedback

- Improves training quality
- Identifies training gaps or wider issues
- Helps trainers develop
- Sometimes the canary in the coal mine



The Problem

- ▶ Trainees don't always tell you when they're unhappy
- ▶ "I'm worried my trainer will hold this against me"
- ▶ The hand grenade after leaving
- ▶ Loudest voices not always the majority
- ▶ Conflicting views
- ▶ Survey fatigue



Established surveys

**General
 Medical
 Council**

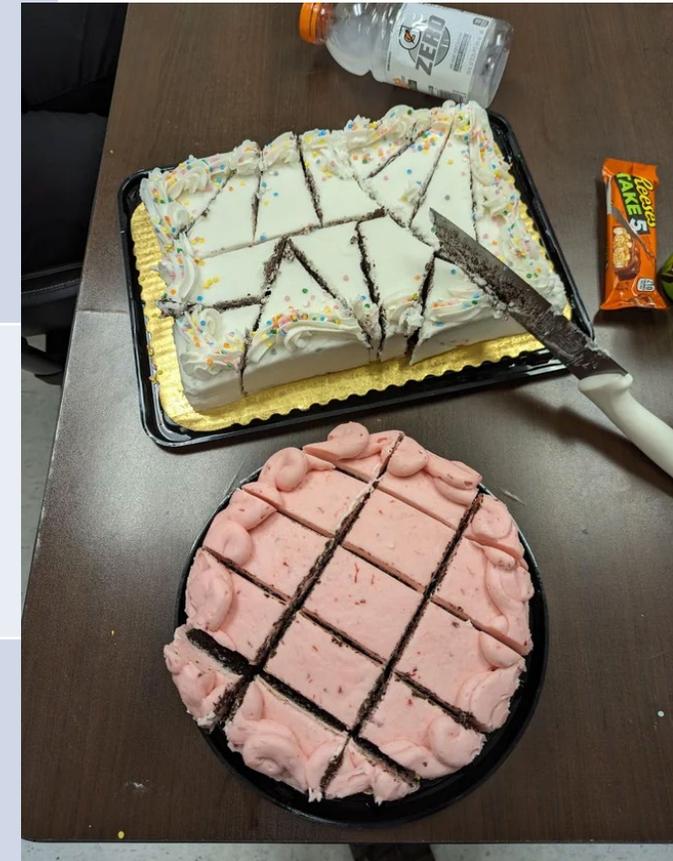


Overall Satisfaction	79.53	76.00	81.26	82.22	75.50	72.00	78.50
Clinical Supervision	86.84	88.31	90.09	86.92	90.50	84.67	89.06
Clinical Supervision out of hours				90.35	90.25	84.73	86.81
Reporting systems					78.44	70.71	78.67
Work Load	41.79	43.87	33.22	41.20	25.52	35.69	40.23
Teamwork						68.33	71.35
Handover	80.47	78.13	87.50	86.72	79.46	77.24	66.83
Supportive environment				78.89	68.75	55.33	73.75
Induction	81.47	82.50	88.68	86.67	77.50	71.67	77.19
Adequate Experience	78.24	78.89	85.26	81.11	81.25	73.67	74.84

**Other Surveys –
 GP, Foundation,
 Programme group
 etc**



Survey	Pros	Cons
GMC NTS	Well established High response rate 70% 50k/71k Trainee and Trainer (RR 33%) Red Flags and Green Flags Free text – Pt safety/Bullying	Annual - March Artefacts (Site/Trust/Programme/Specialty) Anonymous Assignment errors (wrong trust/lead employer) <3 Nil return (loses a lot of data)
NETS	Multiprofessional Growing	Annual - December Low response rate 17% 43k/250k Not specific to medical trainees
STAFF SURVEY	All staff	Annual - September Low response rate 50% Not specific to medical trainees Doesn't address trainee issues



End of Placement surveys

- +/- Voluntary
- Variable response rate
- Not standardised
- Specialty/programme specific
- Anonymous vs confidential

Trainer MSF

- GMC requirement/AOMRC/AoME
- Part of evidence for Annual appraisal
- No standardised survey that everyone uses
- Several different ones with different methodologies
- Most are self selecting/retrospective
- E.g. London deanery – nominate 5 trainees



Multi-Source Feedback for Educational Supervisors

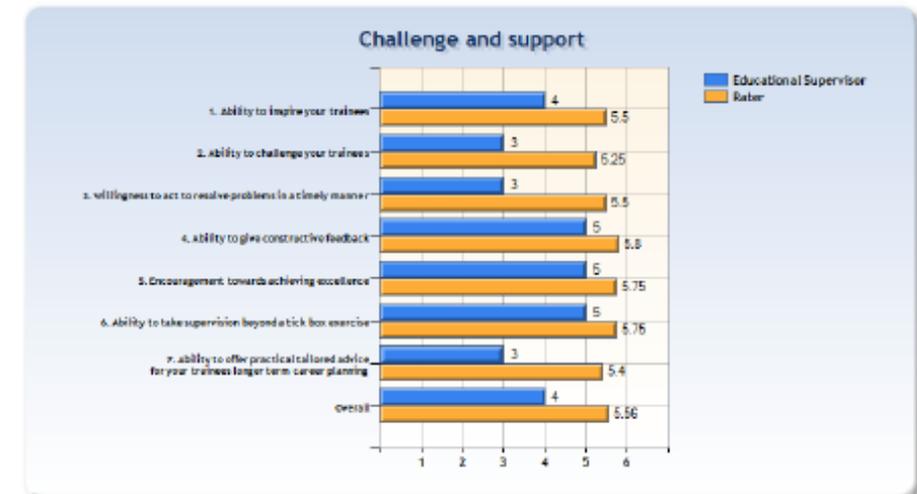
EDUCATIONAL SUPERVISORS NAME: Doctor X

Assessment Completion Date: 02 August 2010

No. Of Completed Raters: 5

Free text comments are reproduced exactly as they are typed by the rater including spelling, punctuation and grammar

The graphs are a visual indicator only. Those marked with a  indicate more than 20% of "Unable to Comment" responses for the question. Please ensure the values given correspond to the graph correctly. Where given, the mean score represents the mean of all questions for that domain.



Educational Supervisor Comments

Areas of positive Experience

I have been able to support a trainee experiencing family problems

Areas for Improvement

I am not fully conversant with the hospital component of training programme requirements for GPs.

Rater Comments

Areas of positive Experience

Dr X ensured that I met my learning objectives and provided useful constructive feedback. She encouraged me to reflect on my clinical practice and identify my strengths.

Gives clear and constructive feedback which is helpful and challenging. Shows genuine interest in my professional development.

Areas for Improvement

Sometimes her instructions are too vague for someone at my level.

Dr X is interested in my career development, however, it would be useful if she has more knowledge of GP training pathways.

The idea

- Design a new End of Placement survey that:
- Is completed online
- Independently administered
- Confidential
- Has a high response rate
- Can be used for assurance reports and trainer MSF

Survey design



Evaluated several trainee surveys



Used Clarke DM. Measuring the quality of supervision and the training experience in psychiatry. Aust. N.Z. J. Psychiatry 1999; 33:248-52 (with permission)



Amended for local conditions and specialties

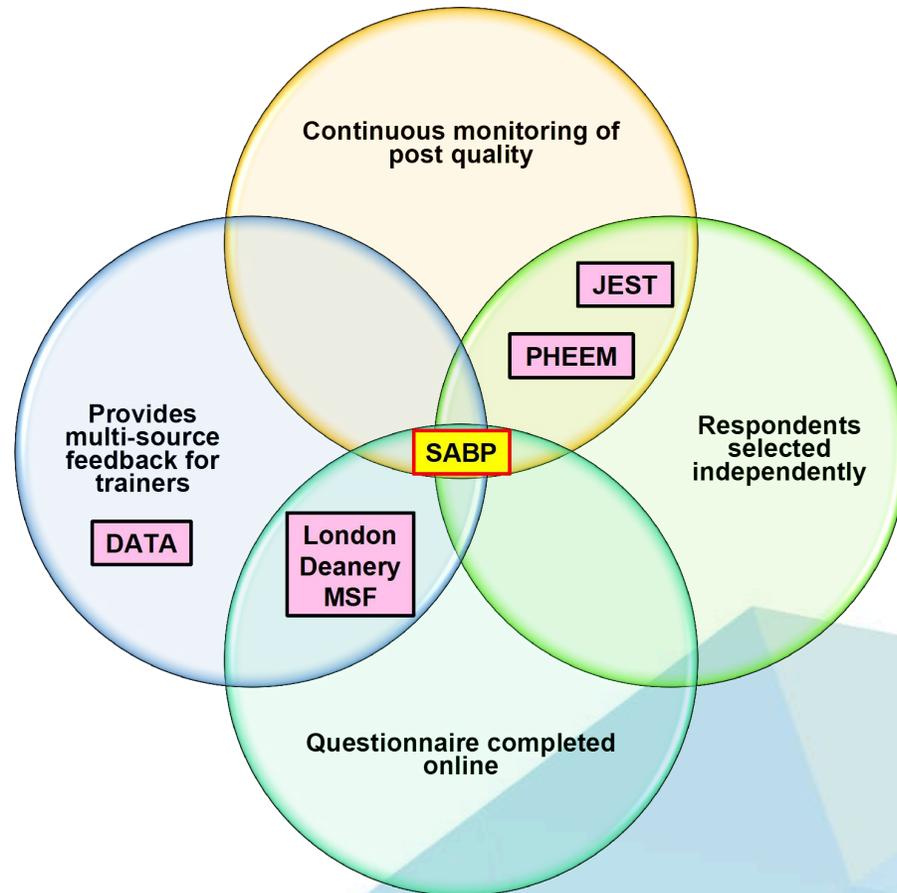


Piloted and developed over several iterations

The Survey overview

- ▶ 32 items using a 5 point Likert Scale (1-2 less than satisfactory, 3 satisfactory, 4-5 outstanding) as well as 8 free text responses.
- ▶ Main Areas:
 - Orientation*
 - Satisfaction with regular caseload, on call experience,*
 - Satisfaction with the academic programme*
 - Quality of supervision*
 - Psychiatry specific competencies*
- ▶ Free text responses challenges and particular strengths of the post
- ▶ Delivered via survey monkey

Trainee Survey comparisons



JEST = Job Evaluation Survey Tool

PHEEM = Postgraduate Hospital Educational Environment Measure

London Deanery MSF = London Deanery Multi-Source Feedback

DATA = Doctors As Teachers Assessment

Trainer MSF comparisons

	Continuous Monitoring of Post Quality	Questionnaire completed online	Provides MSF for trainers	Respondents selected independently	Anonymous/ Confidential	Min no of responses/ cycle length
JEST	✓	✗	✗	✓	Anonymous	NA
PHEEM	✓	✗	✗	✓	Anonymous	NA
DATA	✗	✗	✓	✗	Confidential	10 responses
London Deanery MSF	✗	✓	✓	✗	Confidential	5 responses
SABP MSF	✓	✓	✓	✓	Confidential	2 years*
* MSF reports are released annually but based on the last 2 years survey results.						

Our survey

- Initially Core, Higher, BBT, GP, FY
- Later Community Paediatrics
- Initially crude, manual MSF reports
- Created by hand and emailed individually
- Time intensive

Dear Dr Martin Schmidt,

Please find your anonymised trainee feedback for the period 2013-15. The scores are averaged and on a scale of 1-5 with 3 being satisfactory. Please note if the scores shown in your feedback are less than satisfactory in any area or there is anything of concern in the free text feedback, please arrange a time to speak to your locality tutors as an action. You can use this information in your appraisal.

We have expanded the individual feedback to include the trainees ratings on team induction/orientation and any comments on this. I hope you find this helpful.

Please find below your feedback based on the trainee survey:

Supervisor	Criteria	Dr Martin Schmidt
No of respondents		10 trainees
ORIENTATION (please tick) RATING: 1 = unsatisfactory; 3 = satisfactory; 5 = outstanding	Received introduction and orientation to placement	4.4
	Given expectation of duties and standards of performance	4.3
	Given opportunity to develop and clarify learning goals	4.4
	Any comments / suggestions for improvement?	
CLINICAL EXPERIENCE IN REGULAR DUTIES (please tick) RATING: 1 = unsatisfactory; 3 = satisfactory; 5 = outstanding	Regular Duties Clinical Exposure (expected for particular rotation)	4.2
	Regular Duties Case load (specify below, if excessive or insufficient)	3.9
	Regular Duties Availability of senior support	4.3
	Any comments about Regular Duties?	Busy however manageable, good experience and training opportunities
QUANTITY AND QUALITY OF SUPERVISION *(please tick) RATING: 1 = unsatisfactory; 3 = satisfactory; 5 = outstanding *from your named Educational/Clinical supervisor(s) as indicated in Question 4.	Total "amount" of supervision (specify if too little or too much in text box)	4.8
	Punctuality and reliability of supervisor	4.8
	Availability of supervision	4.8
	Supervisor observed diagnostic and/or management interviews	4.8
	Supervisor demonstrated	4.9

Trainer MSF report

- ▶ Reports now automated
- ▶ Includes comparator data
- ▶ OOH experience
- ▶ Free text responses

SABP Psychiatry Trainee Survey 2025

Supervisor Report for Dr Martin Schmidt



Supervision

Supervision Ratings							
Percent of Question (Index colouring: Trust Average -5% +5%)	Very poor	Poor	Neither poor nor good	Good	Very good	Count	Index
Punctuality and reliability of supervisor					100%	9	100
Availability of supervision					100%	9	100
Supervisor observed diagnostic and/or management interviews			22%		78%	9	89
Supervisor demonstrated diagnostic and/or management interviews				13%	88%	8	97
Supervisor gave constructive critical feedback				11%	89%	9	97
Supervisor gave encouragement				11%	89%	9	97
Supervision was educational					100%	9	100
Supervision provided clinical guidance					100%	9	100
Supervision was supportive					100%	9	100
Supervisor helped me with my portfolio requirements					100%	9	100
Total	0%	0%	2%	3%	94%	9	98
Count	0	0	2	3	84	89	

Any comments about your main supervisor/supervision

FC

I really enjoyed working with CMHRS Reigate team .I managed to achieve all my goals related to this rotation with the help and support of my supervisor.

Excellent supervision and timely distributed summaries of meetings to trainees. Clinical supervisor encouraged discussion about cases

Comments on Work Experience

What aspects of your work experience have been the most difficult

Start of rotation showed a learning curve but improved with good support and supervision.

Formulating differential diagnoses and management plans for patients with complex histories/presentations who do not seem to fit neatly within the boxes of diagnosable mental illnesses or whose clinical picture is vague

difficult conversations with patients

None

What aspects of your work experience have been the most interesting and beneficial

Wkly supervised trainee sessions with supervisors.

the experience of continuously carrying out independent assessments has given me more confidence in discerning true psychotic and high-risk features from those less likely to be harmful or due to a psychosis. I feel more comfortable with antidepressant prescribing and switching regimens

difficult conversations with patients
diagnosis and management plan formulations

Seeing patients in clinic

What aspects of supervision have you liked the most

One hour wkly trainee supervised session are very helpful . These sessions provide us an opportunity to discuss all the cases with supervisor and learn from management plans.

Supervision was regular and helped trainees develop their diagnostic skills through active discussion about cases

case discussions

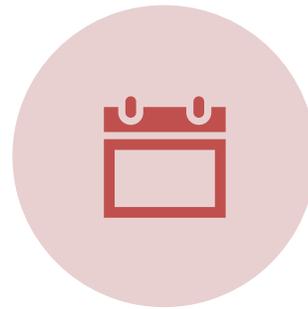
Very efficient and organised

Regularity, very easy to raise clinical questions, very willing to do WPBA. I personally have felt the most supported in this job than any job previously.

In Practice



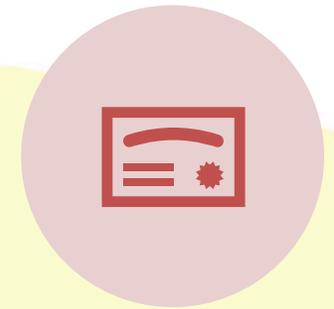
4 ROUNDS A YEAR



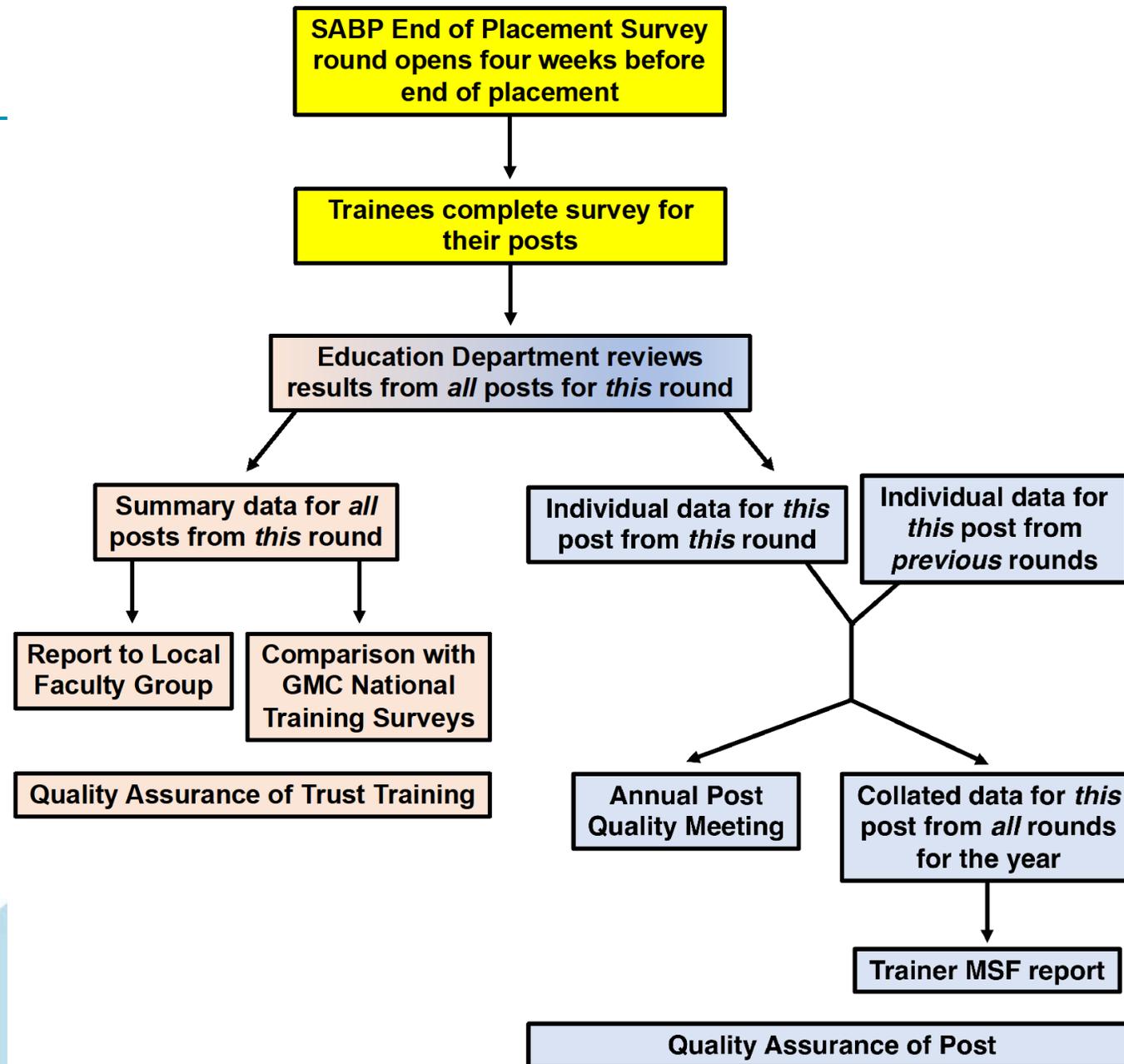
LAST MONTH OF
PLACEMENT - NOV,
JANUARY, MARCH, JULY



SURVEY SENT OUT
WITH WEEKLY
REMINDERS

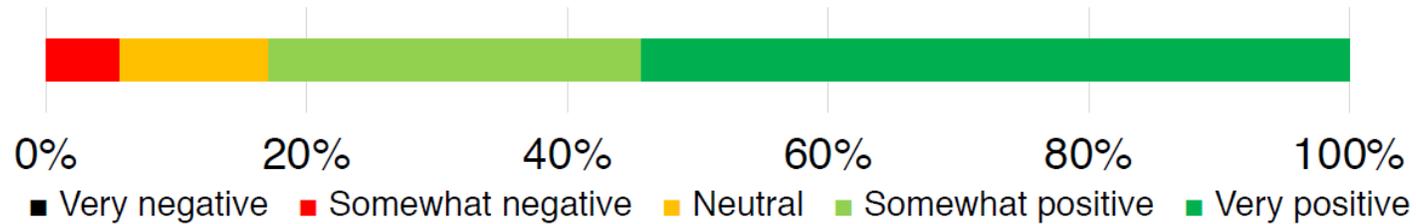


COMPLETION
CERTIFICATE FOR
PORTFOLIO

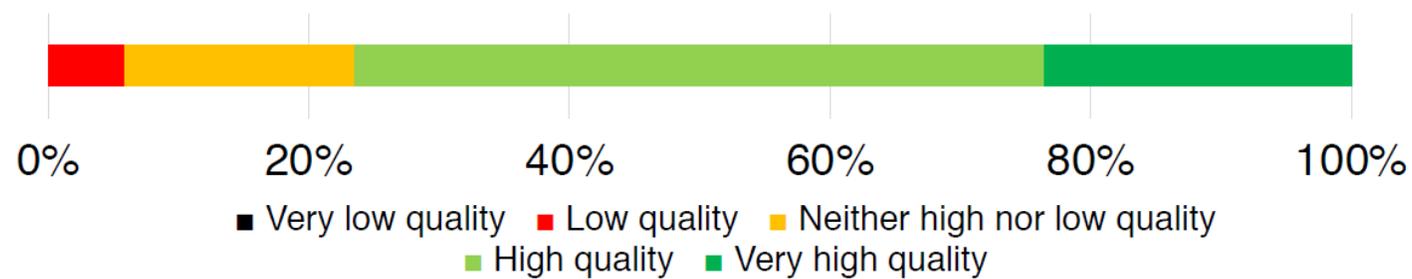


Trainer views

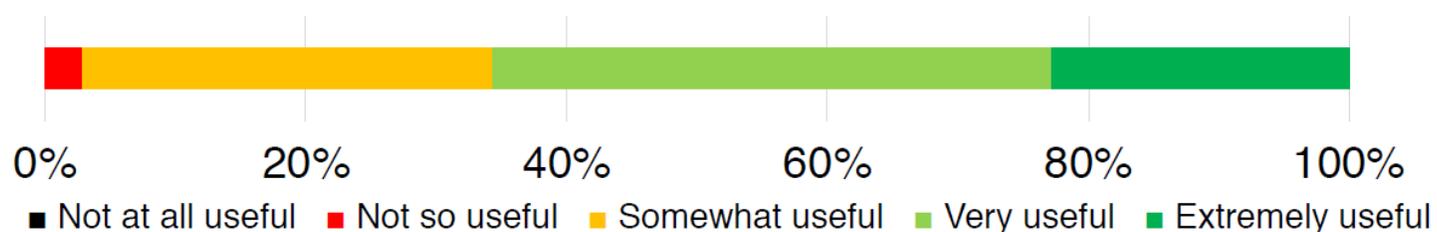
What is your first reaction to the new format Trainer MSF reports?



How would you rate the quality of the Trainer MSF reports?



How useful do you find the new Trainer MSF reports?



Trainer views



"I like the detail it provides, and by bringing together data from different trainees, it allows overall themes to be picked up"

"It gives the supervisors the confidence in continuing areas of good practice which is demonstrated in the report and also gives insight into areas that are not going so well so that they can be improved."

Figure 2 Feedback from trainers on the Trainer MSF reports

LFG feedback



TRAINEE SURVEY OVERVIEW
PRESENTED TO LFG



YSWD REPORTS TO SHOW
VALUE

Response to complaints/Red Flags



Robust post level data helps improve quality



Can help with response to complaints/GMC responses



Drives improvements



Proactive rather than reactive

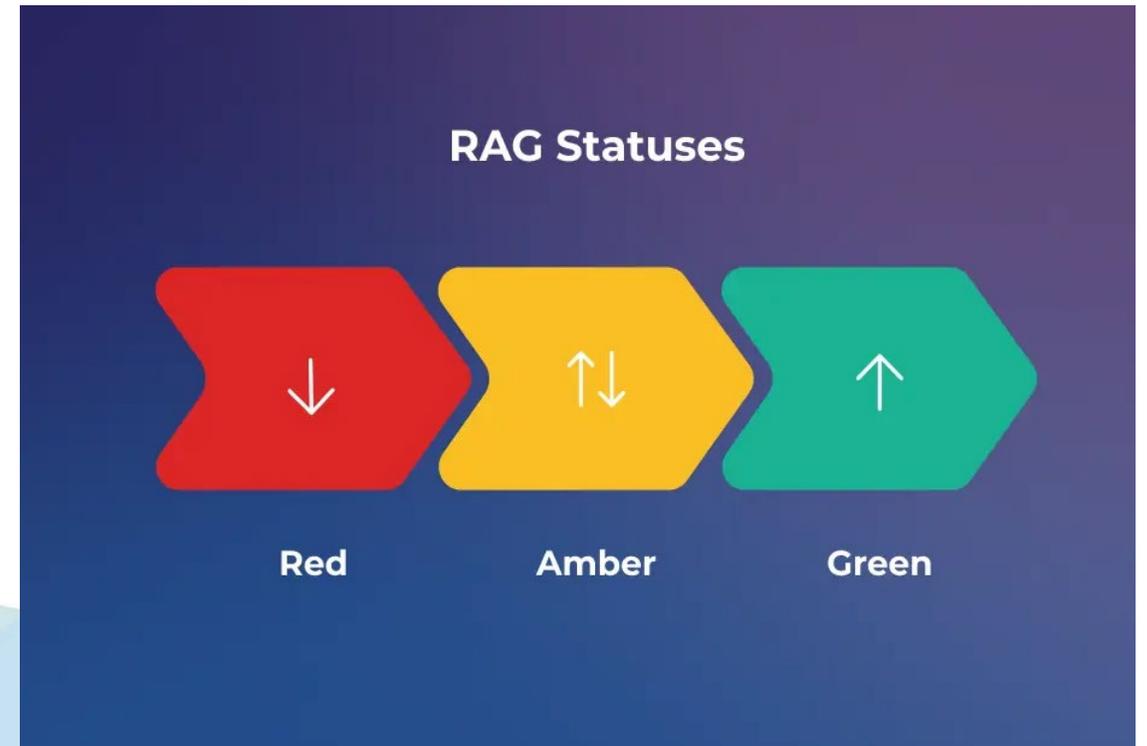
Annual Post Quality Meeting

▶ Data sources:

- *Trainee survey Feedback*
- *GMC/NTS feedback*
- *Informal feedback*

Each Post RAG rated

Action Plans for AMBER/RED



Trainers in Need of Support

- Using Supporting Educators guide
- Range of options including support with job plan/workload, resolving disputes, agreeing reasonable actions
- Serious/unresolved concerns
- Educator role included in annual appraisal



Supporting Educators

A practical approach to managing issues and concerns raised about individual educators

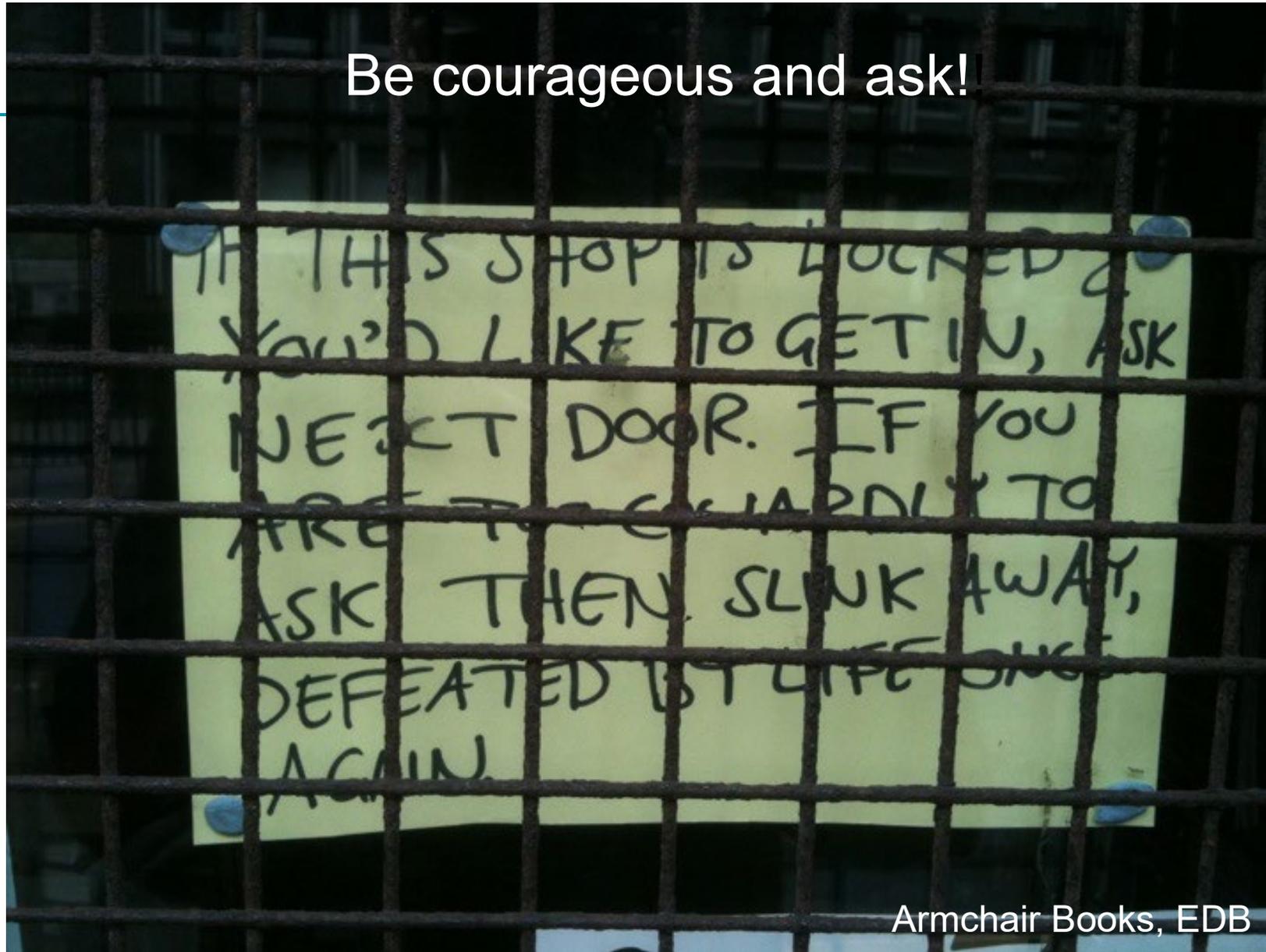
February 2016

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Summary

-  It is possible to combine a digital end of placement quality survey with a trainer MSF
-  The benefits include:
 -  Placement specific, quarterly updates on trainee satisfaction
 -  Early flagging up issues
 -  Supplements other sources of feedback, triangulates data
 -  Provides a rich source of info for complaint investigations/quality visits/GMC responses etc
 -  Supports trainer development and appraisal

Be courageous and ask!



Armchair Books, EDB