

Evaluating a regulator run educational intervention: assessing change in doctors' attitudes towards their regulator and professional behaviours using a theory-based questionnaire

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In this presentation we will cover the following:

- A brief overview of the research design to evaluate the GMC's training programme, "Duties of a Doctor";
- Overview of the Theory of Planned Behaviour;
- How to design a theory-based questionnaire.

The Duties of a Doctor programme

- Is a series of free interactive workshops run by one of the GMC advisers;
- 5-6 workshops, held on a monthly basis;
- Workshops focus on a different ethical subject, helping doctors to understand how GMC guidance can support them in making difficult decisions in their practice.

Overview of the Duties of a Doctor research

Research aims: to research the effects and effectiveness of the Duties of a Doctor programme in changing doctors' attitudes and professional behaviours.



Research questions

- 1) Does the duties of a doctor programme improve participants' **understanding of GMC practice and role**, and if so to what extent?
- 2) Does the programme improve participants' **awareness of wider GMC tools and resources** and where they can be found?
- 3) To what extent does the programme help to improve participants' **perceptions** of the GMC?
- 4) How does the programme help participants to usefully **reflect** on their own practice as doctors?
- 5) Do participants use the programme as a **peer-support** network?

Overview of the Duties of a Doctor research

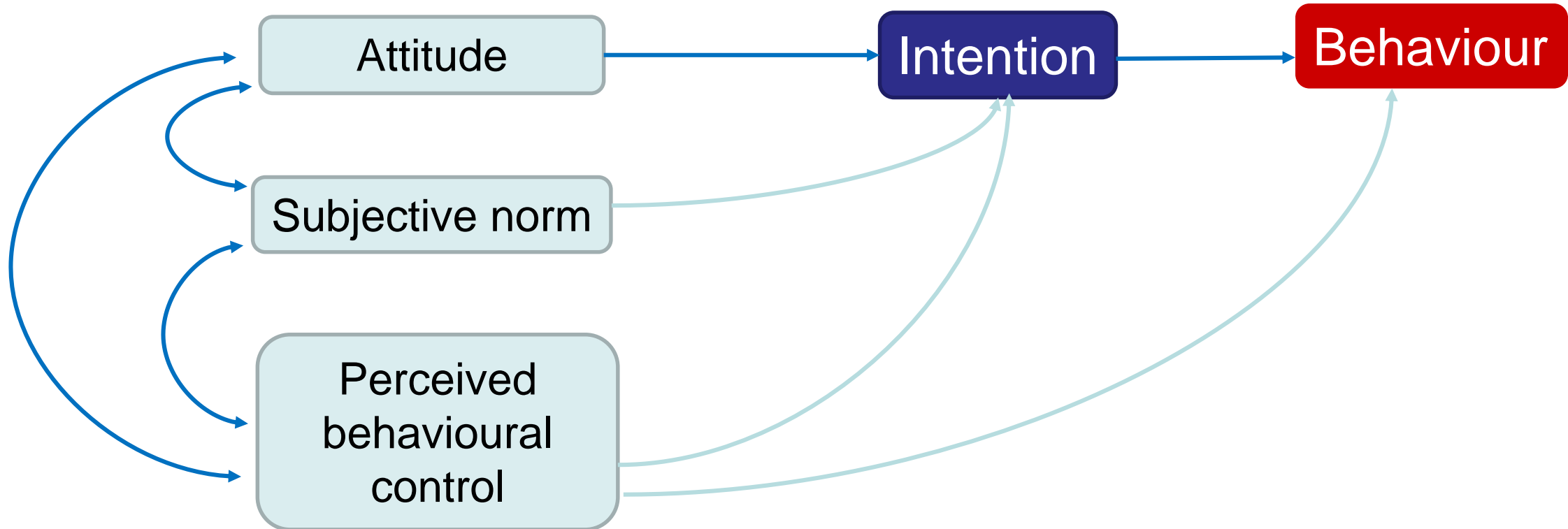
Phase 1: QUALITATIVE

- RLA interviews
- Observations of DoaD
- Participant interviews and focus groups
- Documentary analysis
- Nominated colleague interviews

Phase 2: QUANTITATIVE

- Survey pre and post with DoaD participants
- Control group

Theory of Planned Behaviour (Ajzen, 1991)



Stages of Designing a TPB Questionnaire

Stage 1: Consult published guidance on how to design a TPB questionnaire

Stage 2: Collection and analysis of qualitative data

Stage 3: Generation of items to measure the 4 constructs of the TPB utilising published guidance

Stage 4: Piloting the questionnaire

Stage 5: Administer the questionnaire

Stage 6: Analyse questionnaire properties

Stage 1: Consult published guidance

Two very useful references:

- 1) Ajzen, I. (2006). Constructing a theory of planned behavior questionnaire. <https://people.umass.edu/aizen/tpb.measurement.pdf>
- 2) Francis, J. et al. (2004). Constructing questionnaires based on the theory of planned behaviour: A manual for health services researchers.

Both available online

Stage 2: Collection of qualitative data

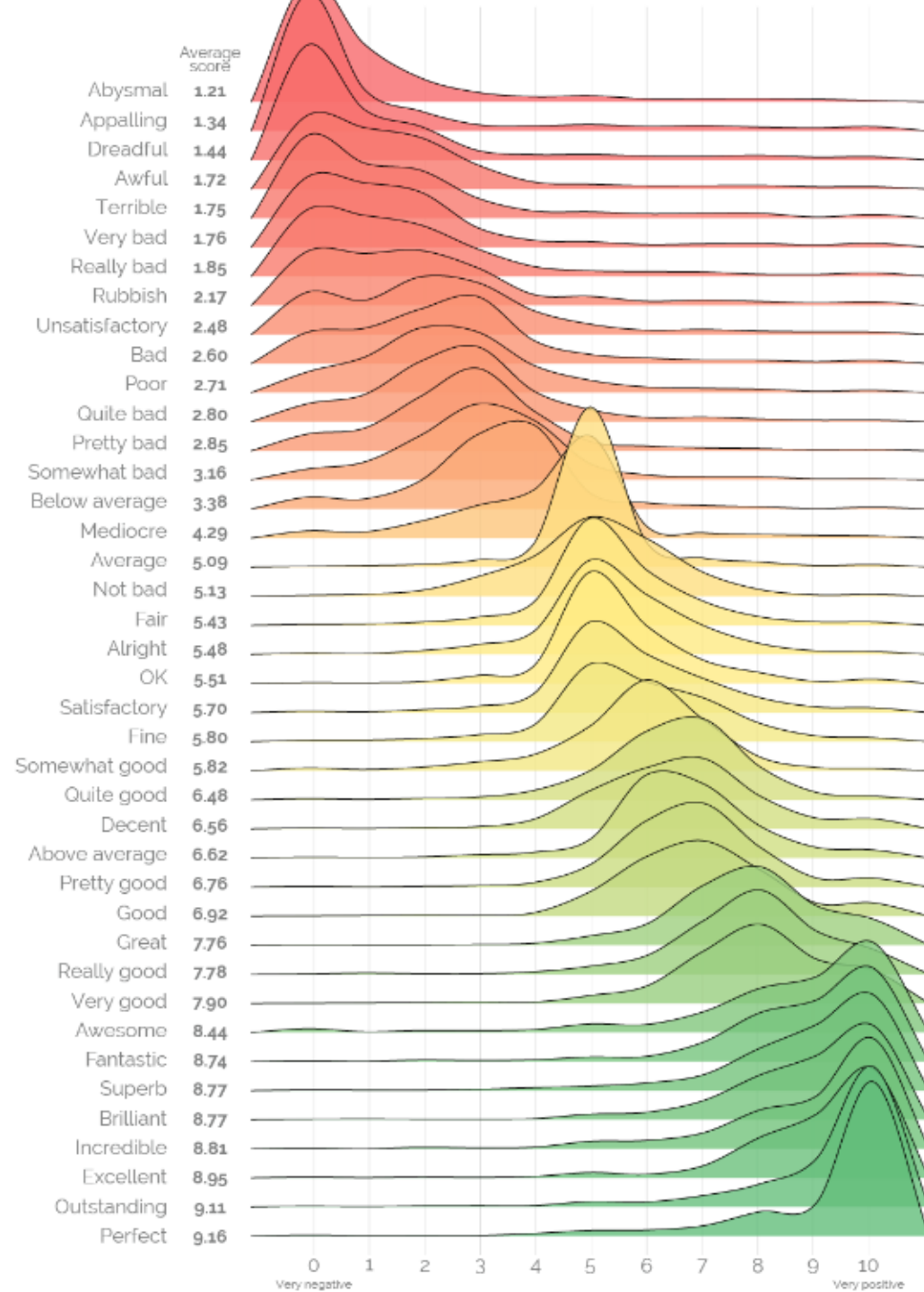
- **Semi-structured interviews and focus group;**
- Four interview schedules: to inform the questionnaire design:
 - General evaluation;
 - Three targeted behaviours:
 - ❖ Use of GMC guidance;
 - ❖ Raising concerns;
 - ❖ Reflective practice.

Stage 3: Generate items

- Generation of items, utilising qualitative findings. For reliability, require minimum of 3-4 items per variable.
- Attitude: “Overall, I think that raising a concern is (unpleasant-pleasant; difficult-easy)”
- Subjective norm: “People who are important to me think I should not report a concern if I have one”
- Perceived behavioural control: “I am confident that I can raise a concern if I want to”
- Behavioural intention: “I plan to raise a concern if I have one in my workplace”

How good is “good”?

<https://yougov.co.uk/news/2018/10/02/how-good-good/>



Stage 4: Consultation & piloting

- Consultation with stakeholders, i.e GMC;
- Identify a sample similar to your target audience who will provide honest feedback (e.g., doctors at UCL Medical School);
- Useful for:
 - Identifying whether questions are understandable;
 - Identifying any problems with response scales;
 - Timing; is the questionnaire too long?
- May require removal or adaptation of items following feedback.

Exploring Doctors' Professional Behaviours

Section One: Your background

This page will be detached and stored separately from the rest of the questionnaire to ensure your anonymity.

1. Please write today's date: _____
2. Please write your GMC number: _____

We will **only** use your GMC number to obtain your demographic information and to link your responses with the 2nd follow-up questionnaire. We will **not** share individual responses with the GMC.

3. Please write your personal email address: _____
We need your personal email address or an address that we will be able to contact you in 3-6 months' time. We will only use your email to invite you to complete the 2nd questionnaire. We will **not** share it with the GMC.

4. Where do you currently work? (please tick)

Chelsea and Westminster Hospital NHS Foundation Trust	<input type="checkbox"/>
East Sussex Healthcare NHS Trust	<input type="checkbox"/>
Epsom and St Helier University Hospital NHS Trust	<input type="checkbox"/>
Gloucestershire Hospitals NHS Foundation Trust	<input type="checkbox"/>
Jersey General Practice or Jersey Hospital	<input type="checkbox"/>
Leeds Teaching Hospitals NHS Trust	<input type="checkbox"/>
North Middlesex University Hospital NHS Trust	<input type="checkbox"/>
Southend University Hospital NHS Foundation Trust	<input type="checkbox"/>
Stockport NHS Foundation Trust	<input type="checkbox"/>
South London Healthcare NHS Trust	<input type="checkbox"/>
South Tyneside NHS Foundation Trust	<input type="checkbox"/>
Tees, Esk and Wear Valley NHS Foundation Trust	<input type="checkbox"/>
The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust	<input type="checkbox"/>
Other (please write): _____	<input type="checkbox"/>

5. Which describes how you think of yourself? (please circle)

Male / Female / Another way / Prefer not to say

6. What is your ethnic group? (please circle)

White	Mixed/ Multiple ethnic groups	Asian/ Asian British	Black/ African/ Caribbean/ Black British	Other ethnic group (please write): _____	Prefer not to say
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7. Please tick the one box that best describes your current role (please tick):

Consultant	<input type="checkbox"/>
Trainee (on an HEE training programme)	<input type="checkbox"/>
Foundation stage	<input type="checkbox"/>
General Practitioner	<input type="checkbox"/>
Other (e.g. Staff Grade, Associate Specialist, Trust Grade, etc.)	<input type="checkbox"/>
Please write: _____	

8. How many years have you been working as a doctor in the UK? (please circle)

<1 1-4 5-10 11-20 >21

Stage 5: Roll-out

- Think through practicalities:
e.g.,
Recruitment
Incentives
Consent
Online vs paper
- Finally, administer questionnaire!

Stage 6: Questionnaire properties: reliability

- Consistency of the different parts of the measure and over time;
- The ability of a questionnaire to produce the same (or at very similar) results under similar conditions;
- Various statistical test.

After all that you might be thinking....



Why bother designing a TPB questionnaire?

- Done properly, it's a very time-consuming process!

Why bother designing a TPB questionnaire?

- There is a lot of evidence to show that the TPB can predict behaviour;
- What we want to know is whether people change as a result of an intervention;
- The TPB allows us to do this because it tells us which constructs to measure to know whether the intervention was successful;
- Properly developed questionnaire measures what it supposed to measure and produces same (similar results) over time under similar conditions.

Thanks for listening

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