



## ANZCA and FPM CPD Program

### Multi-source feedback (clinical support) - guideline

Paired activity

Category 1  
Practice evaluation  
Reviewing performance

#### Purpose

This guideline assists CPD participants, facilitators and feedback responders to complete the multi-source feedback (clinical support) activity.

#### Activity description

The purpose of multi-source feedback (clinical support) (MsF-CS) is to ask colleagues and co-workers ('responders') to provide feedback on your practice by identifying areas of good performance and areas that can be developed further. The essential competencies of every doctor extend across the ANZCA and FPM Roles in Practice including medical expertise, communication, collaboration, leadership and management, health advocacy, scholarship, and professionalism. The MSF-CS items are based on the [ANZCA Supporting Anaesthetists' Professionalism and Performance: A guide for clinicians](#) which may be consulted by those completing the MSF-CS forms as well as the facilitator.

The MSF-CS tool can be used by those with clinical support roles and by those who practise entirely without direct patient care.

Completion of this activity requires a facilitator to collate data from the forms and provide you with feedback. The intention is that this feedback is collaborative, supportive and undertaken for the purposes of learning and change.

#### Related documents

1. [Multi-source feedback \(clinical support\) - form](#)
2. [Multi-source feedback \(clinical support\) - summary form](#)
3. [Multi-source feedback \(clinical support\) - self-assessment form](#)
4. [Multi-source feedback confidentiality and CPD verification form.](#)

#### How to complete this activity

##### Steps

Time period	Steps	Complete
<b>MsF preparation</b>	Identify and invite a suitable facilitator, a trusted colleague who ideally has some experience in providing feedback. They may be another medical colleague or a senior professional colleague who is not medical.	
	Discuss with the facilitator that they are responsible for: <ul style="list-style-type: none"> <li>• Checking that invited respondents (colleagues and co-workers) are representative of the participant's clinical support roles or their practice without direct patient care.</li> <li>• Following up those who have not yet responded.</li> <li>• Summarising results and variations from your self-assessment on the response collation form.</li> </ul>	

Time period	Steps	Complete
	<ul style="list-style-type: none"> <li>• Destroying the original MsF forms after completing the response collation form.</li> <li>• Initiating the feedback meeting.</li> <li>• Discussing the results in a formative way with you at the feedback meeting.</li> </ul> <p>Ask the facilitator to sign the confidentiality section of the <a href="#">MsF confidentiality and CPD verification form</a>.</p> <p>Provide your facilitator with a copy of <a href="#">Practical guidance for CPD feedback conversations</a>.</p> <p>Select and invite at least 10 colleagues and co-workers to provide feedback and seek their verbal consent to be involved. Choose health professionals and others (like professional or administrative staff) with whom you work in your medical scope of practice. They should reflect the breadth of your clinical support activities or practice without direct patient care. For example, if you are an academic responsible for supervising PhD students, a PhD student should be represented among the responders. Whilst it is not necessary that they are all from the same organisation, it is important that they work with you sufficiently regularly to provide feedback on your clinical support performance. Examples include anaesthetists, pain medicine specialists, surgeons, nurses, trainees, academic colleagues, fellow board members, organisational leaders and managers, students, administrative officers.</p> <p>Check that the facilitator agrees with your choice of respondents.</p>	
<b>MsF data collection and summary</b>	<p>Distribute the MsF forms to those that have agreed to take part in the activity. Results from a minimum of six responders must be included on the response collation form, so distributing at least 10 is recommended.</p> <p>Complete the self-assessment form. Forward to the facilitator with a request to arrange a feedback meeting. Published data suggest that any discrepancy between a participant's own judgement of their performance and that of their colleagues is a useful discussion and reflection point.</p> <p>The facilitator follows up outstanding responses. A feedback meeting should be organised as soon as possible after:</p> <ul style="list-style-type: none"> <li>• A minimum of six forms are received, remaining responders have been followed up, and all forms to be included have been submitted.</li> <li>• The participant has completed the self-assessment form.</li> <li>• The facilitator has collated de-identified colleague and co-worker responses on the MsF-CS response collation form and noted any discrepancies between these and the participant's self-assessment</li> <li>• The only copy of the collated response form has been provided to the participant, giving them an opportunity to review and reflect on the results prior to the feedback session. Keep a copy of this collated response form for the feedback conversation but then delete it from your records.</li> </ul>	

Time period	Steps	Complete
	One of the strengths of this process is that responders provide feedback in a confidential manner. The facilitator must not show the participant the original MsF-CS forms submitted, only the response collation form.	
<b>MsF feedback conversation</b>	<p>The participant and the facilitator should meet for approximately 20-30 minutes to talk about the results of the survey. This meeting can occur either face-to-face or virtually.</p> <p>The following is one approach for the facilitator:</p> <ul style="list-style-type: none"> <li>• Ask the participant about their reflections on the feedback, including if there are particular items on the MsF response collation form they are concerned about and aspects of their practice they could improve upon.</li> <li>• Talk through the summary results for each item, discussing areas of strength and identifying areas for improvement</li> <li>• Concentrate on specific areas with a high variance between the participant's self-assessment and the collated feedback. Then specific items of behaviour can be focussed on</li> <li>• Ask the participant to consider why they may have received negative feedback (if any) and discuss how they approach those aspects of practice, including areas to work on.</li> <li>• Discuss the participant's CPD plans for the next 12 months. The facilitator might also suggest additional/alternate activities which support any learning needs highlighted in the MsF.</li> <li>• The facilitator may choose a different model of providing feedback.</li> </ul>	
	The participant asks the facilitator to sign the verification section of the <i>MsF confidentiality and verification form</i> . Both participant and facilitator retain a copy of the form for their CPD evidence.	

Receiving feedback: for the participant

CPD activities are intended to promote supportive conversations that assist you to reflect and advance your practice. Engaging in a feedback conversation may on occasions challenge you and raise uncomfortable thoughts and feelings. If this occurs consider seeking out a trusted colleague or friend for support. Confidential wellbeing support is freely available through the college, details can be found on the [website](#).

**Using a different tool**

If you choose to use a different tool for the MsF-CS activity, ensure it was developed to obtain feedback relevant to your scope of practice. A number of 360- and 270-degree feedback tools are available.

**ANZCA and FPM CPD portfolio recording**

Participants record this activity under:

Category 1 Practice evaluation - reviewing performance: *Multi-source feedback (clinical support)*, with the [Multi-source feedback confidentiality and CPD verification form](#) uploaded as evidence.

Facilitators who are also CPD participants record this activity under:

Category 2 Knowledge and skills: *Review of ANZCA/FPM Fellows*, with the [Multi-source feedback confidentiality and CPD verification form](#) uploaded as evidence.

## Optional related activities

### 1. Critical reflection

You may choose to undertake a Category 1 *Critical reflection* activity on this MsF-CS and develop a plan for practice change. This facilitates the participant 'closing the loop' by reflecting on specific actions they can undertake to improve their practice.

## Change control register

Version	Author/s	Reviewed by	Approved by	Approval date	Sections modified
1	A Merry L Roberts A Ross	P Cumpston A Kattula P Macintyre J Sutherland CPD team DPA education	CPD Committee	October 4 2023	Created