



General Practice Assessment Questionnaire

MANUAL
for
GENERAL PRACTICE ASSESSMENT QUESTIONNAIRE

GPAQ V3

December 2011

This questionnaire has been developed by the Cambridge Centre for Health Services Research at the University of Cambridge in collaboration with Peninsula Medical School. GPAQ was originally developed from the PCAS survey with permission of Dr Dana Gelb Safran



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1. Background

1.1 Introduction

This manual for the General Practice Assessment Questionnaire (GPAQ) explains how the questionnaire was developed, how it should be used, and the options for analysis.

Under the new Patient Participation DES, practices need to undertake a local practice survey at least once a year. The new version 3 of GPAQ was developed to be suitable for the new DES. The questionnaire is available to download from the GPAQ website at www.gpaq.info.

As the number of questions asked in the local practice survey are a matter for the practice and its Patient Reference Group (PRG) to agree based on the priorities identified by the PRG and the practice, GPAQ V3 may be adapted as needed, subject to observation of copyright (see section 2)

In appendix 1, we outline how you might use GPAQ scores to improve care in your practice.

1.2 How was the General Practice Assessment Questionnaire (GPAQ) developed?

Some aspects of quality are best assessed by asking patients. We reviewed the literature to identify aspects of GP care which are most highly valued by patients. These include:

Availability and accessibility, including: availability of appointments, waiting times, physical access and telephone access.

Technical competence, including: the doctor's knowledge and skills, and the effectiveness of his or her treatments.

Communication skills, including: providing time, exploring patients' needs, listening, explaining, giving information and sharing decisions.

Inter-personal attributes, including: humaneness, caring, supporting and trust.

Organisation of care, including: continuity of care, and, the range of services available.

GPAQ addresses aspects of care highly valued by patients with questions focussing mainly on access, inter-personal aspects of care and continuity of care. In order to assess these aspects

of care we originally started from what we regarded as the best available questionnaire at the time, the Primary Care Assessment Survey (PCAS) ^{1, 2, 3, 4} which had been extensively validated in the United States. In collaboration with the Health Institute in Boston, we modified PCAS for use in British general practice. The modified questionnaire was called the General Practice Assessment Survey (GPAS).

For the 2004 GP contract, we were asked to modify our original GPAS questionnaire, and produced GPAQ. The main difference was that the new questionnaire was shorter. There were also two versions, one designed to be sent by post, and one designed to be given to patients after consultations in the surgery. There were minor differences between the two, both in the questions asked, and in resulting scores. Subsequently, we were asked to help design the national GP Patient Survey (GPPS) which replaced GPAQ in the GP contract from 2009 to 2011.

A new version of GPAQ is now available designed to help practices meet local survey requirements for the Directed Enhanced Service (DES) for Patient Participation introduced in 2011. GPAQ has since been widely used in the UK and validated over a number of years, and we have published a range of studies using GPAS, GPAQ and GPPS, ^{5,6,7,8,9,10,11,12,13,14,15}. A small number of questions in GPAQ are designed to be identical to the 2011/2012 version of the national GP Patient Survey (GPPS) which will continue to be run. This will enable practices to benchmark themselves against national and local scores. See section 6.6.

1.3 Why are there no longer two versions of GPAQ?

When we developed GPAQ for the 2004 GP contract, GPs us that they would like the option of giving it to patients in the surgery after consultations or sending it by post. There are pros and cons of the two methods:

- 1) Giving questionnaires out in surgery is cheaper because it avoids postal costs
- 2) The responses can more easily be related to individual doctors and not just to practices. This means that you can use the results for your own personal appraisal, or in your revalidation folder.

The disadvantages of giving GPAQ out in the surgery are:

- 1) You don't get the views of patients who can't get to the surgery
- 2) It's sometimes hard to ensure that all patients in a surgery get a questionnaire.

We therefore developed two versions of GPAQ in 2004 – one for use in surgery and one for use after consultations. In GPAQ V3 we have changed the design so there is a single version that can be used either in surgery or by post, so there is no longer any need for two versions.

See Section 4 on Running a Survey

1.4 How does the new version of GPAQ help practices meet the new DES?

The questions in GPAQ are designed to encompass the breadth of criteria important to patients which practices will want to cover for the DES. GPAQ V3 is available on the GPAQ website as a PDF file (to preserve print margins). If you would like a WORD version, so it can be adapted for your own needs – e.g. by adding questions which are important to your own practice, please e-mail us gpaqadmin@dsl.pipex.com. See Section 2.2 for observing copyright requirements.

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