



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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3. Choosing a sample for the survey

Under the DES for patient surveys, it is the responsibility of the practice to demonstrate to its PRG that the proposed survey or method it chooses as the vehicle for undertaking the local practice survey is credible. Guidance on the DES from the BMA and NHS Employers states that:

Neither is the DES prescriptive on the methodology used to carry out the survey or the number of questions or areas covered. The local practice survey questions can be asked by paper or electronically, in the surgery or by mail depending on what is considered the best way locally to canvas the particular population.

It is the responsibility of the practice to demonstrate to its PRG that the proposed survey or methodology it chooses as the vehicle for undertaking the local practice survey is credible. Criteria for assessing credibility include an assessment by the practice that the processes used for sampling and analysing are sufficient to provide "the reasonable person" with confidence that the reported outcomes are valid.

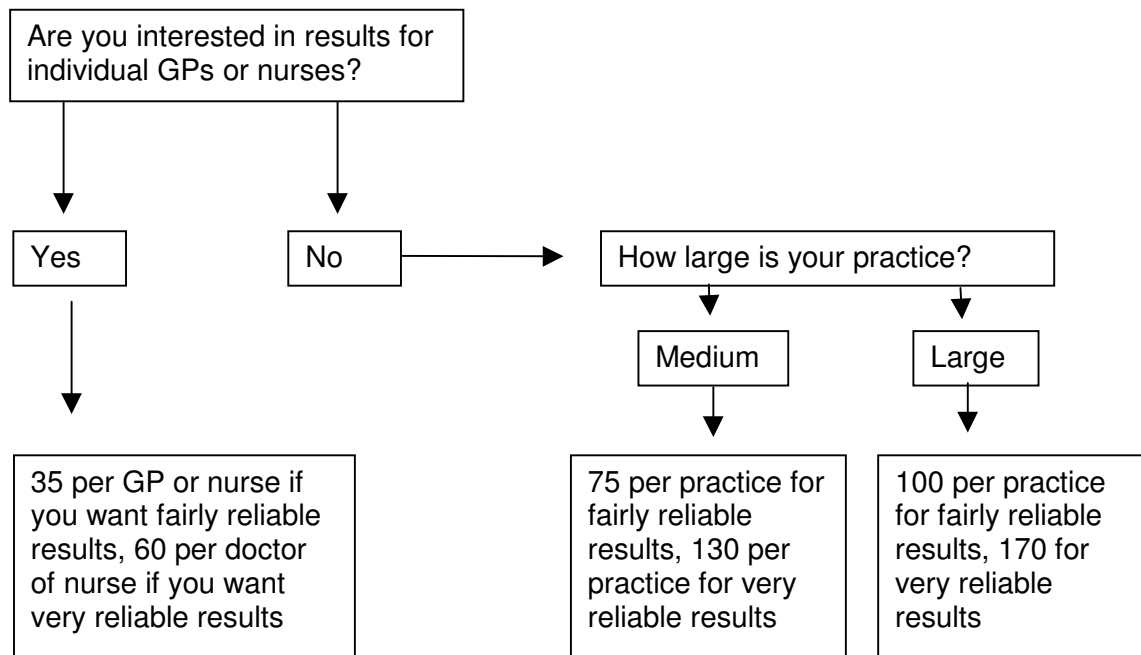
3.1 Sample Size: How many questionnaires do you need to collect for GPAQ surveys?

Based on our research on the reliability of GPAQ questions when they were used in the national GP Patient Survey^{10,11}, we recommend that you should aim to get 35 returned questionnaires per GP to get a reliable result for each GP. This calculation is based on the questions which relate to communication in the consultation, questions about getting through on the phone and getting appointments, and questions about continuity of care. If you want individual level results for your nurses, then you'll need 35 returned questionnaires from nurse consultations as well.

The suggested number of 35 is based on a moderate level of reliability (e.g. reliability coefficient of 0.7). If you want more reliable results (e.g. reliability coefficient 0.8), you need to increase to around 65 returned questionnaires per GP or nurse.

If you're only interested in results at practice level and not scores for individual doctors or nurses then it's slightly more complicated. In theory, you need the same number (i.e. 35 per practice). But if you did that, you might be getting a very small number from some surgeries (e.g. only two of three per GP in a 10 doctor practice). This increases the chance of unusual patients being selected and biasing the results. For this reason, we recommend more questionnaires for larger practices, say 75 for medium sized practices and 100 for large practices.

So in summary:



3.2 Sample Quality

3.2.1 Take time to make sure the sample is correct

It is a requirement for the DES that you choose your sample carefully. Make sure the sampling strategy you use is clear. For example, make sure patients you give or send the questionnaire to are chosen randomly, or that they represent all patients attending a particular surgery, and that they are in the correct age range (16 or older).

For postal or e-mail surveys you may wish to select your random sample of registered patients or patients who have visited the surgery within the last 6 months. Before you send postal surveys, you should check the list before you send out questionnaires in case any patients have died.

3.2.2 Patients who don't speak English

GPAQ is currently only available in English. It is expensive and time-consuming to translate questionnaires or provide interpreters, and if you have a very high proportion of non-English speakers in your practice, you might want to use other methods to get their views of the care you provide (e.g. by using your Patient Reference Group). The national GP Patient Survey can be completed online in 13 languages (www.gp-patient.co.uk), but the individual language versions can't be downloaded.

GPAQ V2 was translated into a number of other languages, but GPAQ V3 is currently only available in English. Translation of the questionnaire into another language is not straightforward. If you plan to do this, there are some translation guidelines for health questionnaires (e.g. see <http://www.rmdq.org/downloads/Translation%20process.doc>)

If you produce a version of GPAQ in another language, we would be very interested in including it on our website. Please get in touch with us.

References

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