

General Practitioner of the Year 2017



Royal College of
General Practitioners

Closing date for nominations – 5.00pm Wednesday 31 May 2017

Please use either black ink or type and return to us by post or email, contact details are at the end of the form. You may continue any of your answers on a separate sheet if necessary.

Nomination Form

YOUR NAME

DATE

**FOR OFFICE USE
ONLY**

YOUR ADDRESS

YOUR CONTACT
NUMBER

YOUR EMAIL
ADDRESS

GP NAME

PRACTICE ADDRESS
AND CONTACT
NUMBER

PREFERRED
METHOD OF CONTACT _____

ARE YOU A PATIENT OF THIS GP? YES NO

If you are not a patient, please say how this GP is known to you.

This award, which commends GPs for the difference they make to their patients' lives, is nominated by members of the public who feel that their GP has provided them with an outstanding level of care above and beyond the call of duty.

From the nominations received a list of finalists including the runners up and winner are chosen by the RCGP Northern Ireland Patients in Practice (PiP) Group*.

Reason for Nomination

Please tell us why your GP deserves to be awarded 'GP of The Year' in as much detail as you can.

Please rank below the top 5 qualities which you believe best describes your GP, with 1 being the highest

<input type="checkbox"/> Caring	<input type="checkbox"/> Investigates all areas of illness/complaint thoroughly
<input type="checkbox"/> Good listener	<input type="checkbox"/> Is always up to date on the treatment for my condition
<input type="checkbox"/> Builds confidence & a trusting relationship quickly	<input type="checkbox"/> Always considers my medical history when treating me
<input type="checkbox"/> Takes time to explain things, making sure I understand	<input type="checkbox"/> Makes links with other care professionals to help with my treatment
<input type="checkbox"/> Communicates in a clear but sensitive manner	<input type="checkbox"/> A GP who does what they say they will do
<input type="checkbox"/> Takes additional interest in my whole family	<input type="checkbox"/> Other – Please specify below
<input type="checkbox"/> Does what they can to make my life better with illness	

If you ticked 'Other', please specify _____

Please give examples of how your GP is "outstanding" in the qualities you have selected above.

How have you and your GP worked together in managing your health issues?

What impact has that had on you/your family?

Please describe why you feel this GP should win the award of GP of the Year 2017 (200 words maximum)

IMPORTANT: PLEASE COMPLETE THE SECTION BELOW

GPs who are nominated may wish to see their nomination. Are you happy for your GP to see your nomination?

Yes

Yes (but please do not reveal my identity)

No

RCGP Northern Ireland may wish to reproduce an anonymous version of your nomination in print for promotional or learning purposes. Patients will not be identifiable in the text used. Are you happy to agree to this?

Yes

No

Please could you tell us how you heard about this award?

Please tick this box if you consent for information on this form or any photographs taken to be used for publicity purposes by the College.

Signed:

(Main Contact)

Date:

NOTES TO APPLICANTS

The aim of this award is to identify a General Practitioner who goes **above and beyond what might reasonably be expected**. Please bear this in mind when completing the form and attach any other information you think may be of interest to the judges, e.g., a practice leaflet.

Please complete this form in BLOCK CAPITALS in type or black ink.

The nomination will be judged solely on this form and accompanying information. Please ensure all sections are completed.

Please answer all the questions and sections contained within the form and return before the closing date.

All forms will be anonymised prior to any judging taking place.

Please note that last year's winner is exempt from entering in 2017.

*All received nomination forms will be acknowledged. Nominations will be judged by the RCGP Northern Ireland PiP Group. PiP is composed of lay members and GPs from within Northern Ireland who meet regularly throughout the year to discuss patient related issues.

Winners will be contacted in due course.

Please remember to attach any additional sheets to this form

Closing date for return of completed entries is: 5:00 pm Wednesday 31 May 2017.

Please post or email your completed form by the closing date to:

Michelle Newell
RCGP Northern Ireland
4 Cromac Place
Belfast BT7 2JB

T: 020 3188 7727
E: Michelle.Newell@rcgp.org.uk

No correspondence will be entered into relating to the adjudication of this award.

If you would like this form in a larger print, please contact the RCGPNI office on Tel: 020 3188 7727.