Practice Information Sheet - Exploratory Trial Phase

We would like to invite your practice to take part in a research study. The study is part of a programme of research that is examining ways of improving patient experience in primary care. Before you decide whether you would like the practice to take part, please take time to read the following information. If there is anything that is not clear, or if you would like more information then please contact the research team (see reverse for details). All communication will be treated confidentially.

What is the purpose of this study?

The NHS is increasingly interested in patients' views of their doctors, nurses and health care. The introduction of the national General Practice Patient Survey (GPPS) is part of this development. Results from the national survey are providing a description of patient experience in all 8500 general practices in England and have been used by practices to identify areas for improvement.

Real-time feedback (RTF) is another method for collecting patient feedback. It involves the systematic collection, analysis and reporting of information from patients after they use a health care service. Feedback on specific topics can be collected continuously using touch-screen kiosks or hand-held devices in the waiting area. The feedback can be regularly collated (e.g. every fortnight) and reported back to the practice to inform and support service improvement. By reflecting and acting on the patient feedback while it is 'fresh', organisations can monitor whether improvements are needed and, if changes are implemented, what effect these are having on the experience of patients.

This exploratory trial will investigate with a small number of GP practices whether RTF might be a feasible and acceptable means (with or without facilitated reflection) of identifying ways in which practices can improve patient experience. The results of the study will guide the design of a larger randomised controlled trial which could investigate the effectiveness of real-time feedback in bringing about improvements in this setting.

Why has the practice been chosen?

We intend to recruit a total of 10 practices to take part in the exploratory trial from a number of geographical areas, including: Devon, Cornwall, Bristol, Somerset, Cambridgeshire, Bedfordshire and North London. Practices' previous GPPS results will inform which practices we invite.

Does the practice have to take part?

We hope that your practice will be willing to take part, but there is no obligation to do so. If you decide not to take part, we will respect your decision and, of course, it will not affect your professional role in any way. If you do decide to take part, the practice manager or senior GP partner will be asked to sign a consent form on behalf of the practice before the research begins. The practice is however free to withdraw at any time, and without giving a reason. Practice team members will be asked to individually sign a separate consent form if they are willing to take part in a focus group at the end of the study to help us evaluate the RTF intervention and the research methods.

What would happen if the practice agrees to take part?

If your practice agrees to take part, we will arrange a convenient time to visit to explain the study in more detail, and answer any questions or concerns the practice team might have about the research. After the preliminary meeting, we will ask the practice manager (or senior GP) to complete a consent form and fill in a *short questionnaire about the practice*. We will also ask each

member of the practice team to individually fill in a short questionnaire about team working and their attitudes to patient feedback.

Practices will then be randomly allocated to one of four different RTF intervention groups (2 practices per group) or to a control group (2 practices). The practice will **not** be able to choose which trial group it goes into. All practices will receive some form of RTF package – at no cost to the practice – but we will vary the timing of RTF collection, the level of feedback reporting, and whether or not the practice team receives support from a trained facilitator. The researcher will contact you after the randomisation stage to let you know which group the practice has been allocated to and will explain what this means in practical terms. The researcher will also agree convenient dates when the different research activities can take place.

If your practice is allocated an intervention group, the study will involve the following stages:

- RTF set-up and training: We will arrange for two touch-screens to be set up in the practice waiting area and for your staff to have a training session. This will be followed by a 1- to 2-week 'run-in' or 'test' period to allow staff to become familiar with the equipment and (with our support) iron out any practical problems.
- The RTF collection phase will then start and run continuously for 12 weeks. During this period, you will be asked to collect feedback from patients who attend the practice (see below).
- Practice feedback reports: The practice will receive reports (every fortnight) which summarise
 the patient feedback that has been collected via the touch-screen equipment. The type of report
 you receive will depend on the intervention group you are allocated to. Some practices will
 receive feedback at the level of the practice team only, while other practices will receive
 feedback at the practice team level and at the individual practitioner level (for GPs and nurses).
- Facilitated reflection session: Approximately half of the practices will also receive input from a trained and experienced facilitator mid-way through the RTF collection phase. The facilitator will help the practice team to reflect on their patient feedback and discuss whether/how improvements could be made. The session will last 1 hour and will take place at the practice on a date/time that suits the team. Refreshments will be provided.
- Follow-up staff questionnaire: At the end of the RTF collection phase, each member of the practice team will be asked to fill in a short questionnaire about their attitudes to patient feedback.
- Team focus group: At the end of the study, we would also like to organise a group discussion (to include GPs, nurses, practice managers, and reception staff) to explore your views and experiences of the RTF package the practice piloted. The discussion will last approximately 1 hour and will take place at the practice. Refreshments will be provided.

With your permission, a researcher will visit the practice once a fortnight to observe how the feedback collection process is working and to explore patient reactions to this. During two of these visits, the researcher will also request *anonymised* data on the number and age/gender breakdown of consulting patients for a specific time period so that we can calculate your RTF response rate.

If your practice is allocated to the control group, the study will involve the following stages:

- Follow-up staff questionnaire: Approximately 14 weeks after the practice has been randomised, each member of the practice team will be asked to fill in a short questionnaire about their attitudes to patient feedback.
- RTF set-up and training: Once all follow-up questionnaires have been returned, we will arrange for two touch-screens to be set up in the practice waiting area and for reception staff to have a training session. This will be followed by a 1- to 2-week 'run-in' or 'test' period to allow staff to become familiar with the equipment and (with our support) iron out any practical problems.
- RTF collection will then start and run continuously for up to 12 weeks. During this period, you will be asked to collect feedback from patients who attend the practice (see below).

• Practice feedback reports: The practice will receive reports (every fortnight) which summarise the patient feedback that has been collected via the touch-screen equipment. The reports will be presented at the practice level and at the individual practitioner level (for GPs and nurses).

With your agreement, we would like to have access to the patient feedback you collect using the touch-screens (this data will be supplied to us *in anonymised form* by the RTF provider). We would also like to have *anonymised* data on the number and the age/gender breakdown of consulting patients over the 12 weeks that you collected RTF, so that we can calculate an RTF response rate.

Your team will <u>not</u> be asked to attend a facilitated reflection session or to take part in a focus group at the end of the study.

How will the RTF equipment work?

All patients who attend the practice during the 12 weeks of RTF data collection will be eligible to provide their *anonymous* feedback as they leave the practice, using a touch-screen kiosk or desk-top device. We will provide, free-of-charge, the RTF equipment as well as posters and leaflets to inform patients about the opportunity to provide feedback. Practice staff (receptionists, GPs, nurses) can also encourage patients to leave their feedback.

Throughout the study, technical support will be available if needed from the RTF provider, Customer Research Technology (CRT). The touch-screen equipment can usually be set up so that data is automatically transmitted to CRT Limited for analysis (e.g. using Wi-Fi Networks or 3G technology). Where connectivity is poor, RTF responses can be saved onto a data stick but practice staff would need to e-mail RTF data to CRT Limited at the end of each day.

The touch-screens will present a series of questions asking patients about:

- their age, gender and ethnic group;
- their experience of accessing services e.g. contacting the practice by telephone, booking an appointment, helpfulness of reception staff;
- their overall satisfaction with the service they receive from the practice;
- whether they would recommend the practice to their family or friends;
- whether they have just seen a health professional;
- (if they have seen a GP or nurse) how they rate that health professional's communication skills.

The practice team will also be able to choose <u>up to two questions</u> relating to areas on which they would like to collect patient feedback. These questions could be varied if necessary across the 12 weeks of RTF collection.

Who would have access to the information?

All information collected during the course of this study will be kept strictly confidential. All anonymised patient feedback collected by the touch-screen equipment will be analysed by the RTF provider for the purposes of producing the practice fortnightly reports. All patient feedback and other data collected from staff questionnaires, focus groups or observational work will be analysed by the research team for publication. All study data will be stored securely by the University of Exeter Medical School. At the end of the study, the confidential records and files will be kept for 7 years and then destroyed. The confidential handling, storage and disposal of data are compliant with the Data Protection Act of 1998.

What will happen to the study results?

The findings from this study will be published to help NHS staff, organisations, policy makers and researchers understand whether RTF might be a feasible and acceptable method for obtaining and acting on patient feedback. No individual will be identified personally in any report or publication.

The findings of the study will also help the research team to determine whether RTF is an effective way of improving patient experience.

What are the possible benefits and the possible risks of taking part?

Taking part will provide practice teams with patient feedback that can be used to identify areas of strength and opportunities for improvement. We do not foresee any risk in participating in this study, although we do understand that some staff may feel uncomfortable about receiving feedback. For this reason, we will encourage participating GPs/nurses to identify a supporting medical colleague with whom they would feel comfortable discussing their personalised feedback.

Service support costs

We will reimburse participating practices for the time that their staff spend supporting the research activities. We have applied for funding from NHS service support costs and will confirm the exact payments that will be available as soon as possible.

Who is organising and funding the study?

The study is organised by the University of Exeter Medical School and the University of Cambridge. The study is funded by the Department of Health.

Who has reviewed the study?

This study has been considered by the appropriate NHS Ethics regulatory body and the Royal Devon & Exeter NHS Foundation Trust R&D local research committee who have determined that this study does not require NHS Ethics approval. All other local research governance approvals are in place.

What if there is a problem?

If you have any reason to complain about any aspect of the study or the way you have been approached or treated during the course of this study, please contact the lead researchers.

What will happen next?

Once the research team has received your completed response sheet, a researcher will contact you by telephone or email to discuss your participation further. In the meantime, if you would like any further information, please use the contact details below.

Further information

If you would like more information before deciding, or have any queries concerning the study, please feel free to contact the study researchers.