

# GP Website (Footfall) Scenario Testing Report March 2021

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### 1. Introduction

Two previous surveys both found that a significant proportion of website users find navigation of the existing Footfall site unintuitive, thus making it hard for them to achieve their desired goal (e.g. submitting a request/query). In order to test how members of the public access, use and journey through the Footfall website, research participants were presented with a variety of different tasks for them to carry out in their own time when it most suits them. Findings from this research will be used to support Silicon Practice in its work to continually improve user experience of the Footfall websites. This improvement will be measured via changes in NPS ratings across Footfall user surveys, supported by verbatim comments.

### 2. Methodology

The survey was designed by the Research & Insight team at SHHCP. The participants were selected from respondents of a pop-up poll that was run previously on the GP practice websites. From these, participants were selected to cover a range of digital competence and age. The survey was open from 25<sup>th</sup> March until 31<sup>st</sup> March 2021. Respondents were provided with an incentive for completing the survey in the form of a £20 Amazon gift voucher.

In total, 18 residents completed the survey, with 10 identifying as not having previously used GP web services, 7 having previously used GP web services and one respondent was unsure if they had used the GP web services before.

### 3. Considerations

The survey was carried out with a small sample size, with participants that were selected to provide a range of ages and digital competency. Participant’s digital competency was based on a self-assessment measurement and could not be ratified on an independent scale. This could provide the

opportunity for participants to rate themselves higher or lower than someone else with the same digital skills due to their views of what is skilled or not skilled.

#### 4. Respondent Demographics

Figure 1 shows respondents by breakdown of their age; 39% of all respondents were aged between 55-64 years. Figure 2 shows that over half of respondents (50%) identify as being Female while almost two fifths of respondents (39%) identify as being male. Figure 3 shows the respondents by their ethnicity, with a resounding majority (94%) being White – British. Figure 4 shows that the largest proportion of respondents (78%) do not have any level of disability, while 22% of respondents reported having a disability that limits their daily activity a little. Finally, figure 5 shows that the majority of respondents had not previously used a GP website (56%) while 39% of respondents had previously used a GP surgery website. The average digital score for all respondents is 25 out of a potential 30.

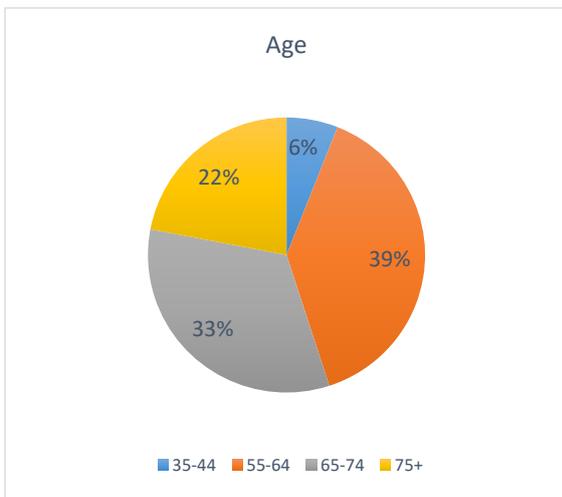


Figure 1: Respondents Age (n=18)

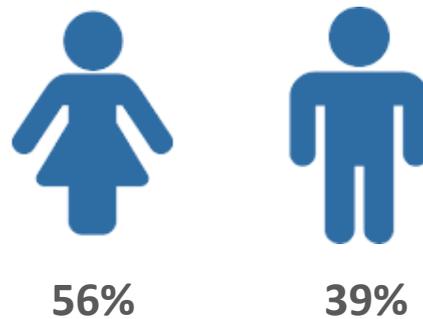


Figure 2: Gender of participants (n=18)

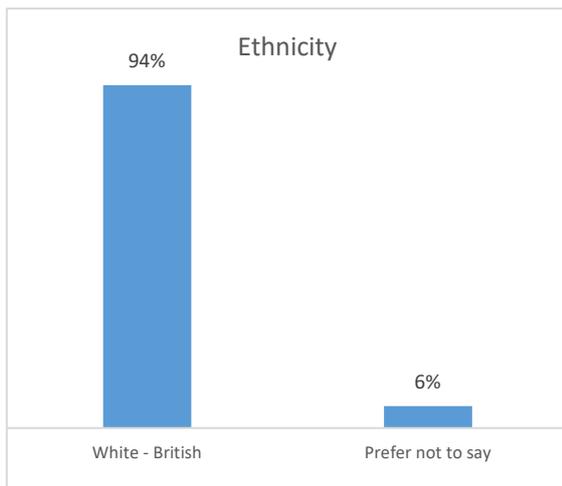


Figure 3: Respondents Ethnicity (n=18)

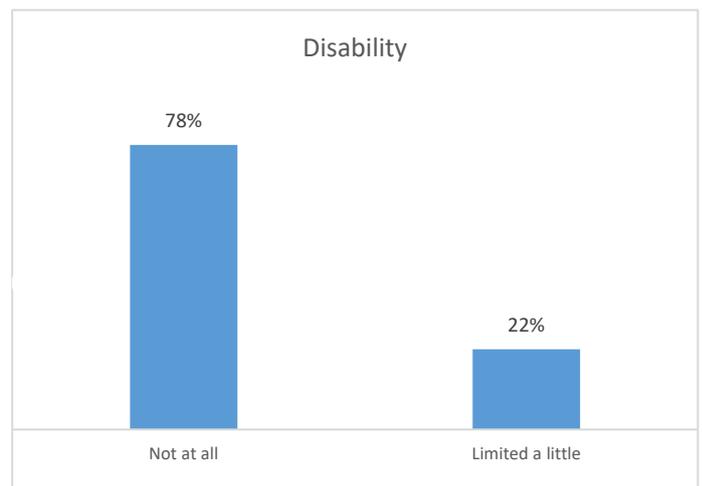


Figure 4: Are respondents daily activities limited by a disability (n=18)

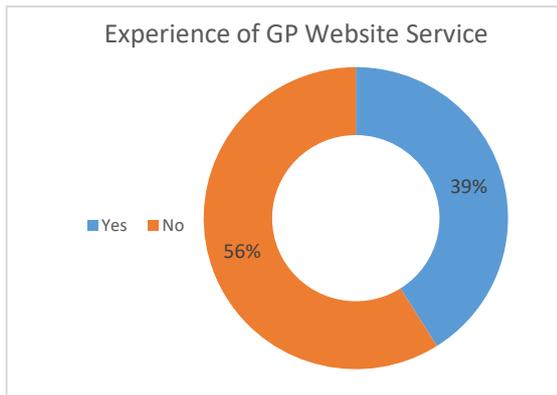


Figure 5: Previous experience of using GP website (n=18)

## 5. Initial Perceptions of the GP Website

Respondents initial views of the webpage layout and design were taken, with the largest positive theme (10 comments) being that it appeared easy to use, while a further 4 comments identified it as having a clear design. Conversely, the main negative theme (5 comments) was that the rooms are confusing with no clear distinction between what each room contains and where patients should go for a specific enquiry. Additionally 4 comments identified issues with the design of the website with one respondent stating the following:

*“Initially you are presented with a lot of information. The cookie acceptance, the Covid-19 message (which goes off the screen). (...) The red bar at the top is distracting. The left hand menu is cluttered and the spacing does not give much room between different types of things. The site map, site credits etc. links are jammed up against the rest of the menu options. This menu should be spaced out further and clear font colours and sizes to distinguish headers from links (e.g. flu vaccination compared to flu vaccination update). The grey font in the right hand pane is not clear and should be spaced out further and likely made a stronger colour. **Overall it is cluttered and cramped.** The header and left hand menu needs the spacing and clarity of the right hand pane. The page at the moment would not suite those with eyesight issues or the older generation.”*

The homepage was found to be clear in 5 of the comments, but also lacking a description of what each room contained (4 comments) as well as missing a dedicated tile for booking an appointment (4 comments). Within the rooms, 3 of the comments identified an overlap of information between rooms causing confusion as to which was the correct room for them to be looking in.

*“Could you reduce the number of tiles? Treatment and consulting are both appointments - book an appointment? Admin and reception are virtually identical in content, why duplicate the same thing in different locations? Why have ask receptionist a question or ask the practice a question when they both lead to the same form - ask a question! Why have test results and medical reports accessed through different routes whereas the sick notes and referrals appear on both? Wellbeing centre arranged alphabetically, but quite different needs. This is signposting, but bereavement and maternity services are very different, not sure why physiotherapy self-referral is here rather than referral through the admin office? Treatment room - includes chronic colds, coughs and cold sores alongside more immediate problems burns and scalds, animal bites and minor head injury these should be separated.*

*Registering as a new patient should be at the front of the reception or admin - registering for online services is not the same as new patient."*

*"Reception and Admin duplicate each other"*

The largest proportion of responses felt that the homepage was easy and clear (6 respondents), but 4 respondents felt a description of what each room contains and the inclusion of graphics or images would improve the page. Additionally 3 comments identified the need for an additional individual tile for booking an appointment, rather than having to locate it within an existing room.

## 6. User Journey 1

The first user journey required respondents to use the website to try and make a request for a repeat prescription in 5 minutes. Three respondents failed to make a request for a repeat prescription, 5 respondents felt it took longer than they expected and 12 respondents felt it took about as long as they expected. Of those who felt it took longer than expected, only one of these was a non-user, and of those who felt it took about as long as expected, eight of these were non-users.

Nine of respondents found that the site was either easy or very easy to navigate, with only 3 respondents finding it difficult to navigate and 7 respondents having a neutral opinion of the ease of navigating the website. For this question, seven of the nine respondents that found site easy or very easy to navigate were non-users, and only one of the three users that found the site difficult to use were non-users.

The greatest proportion of respondent's comments (8 comments) felt that the information for their repeat prescriptions should be already filled in and selectable. This was summarised by one respondent where they stated *"It would be better to be able to login as the patient and select the drugs which you would like to re-order rather than have to manually enter the information."* It was also identified across two comments that the site felt to be unintuitive, confusing and that there were too many options to choose from.

## 7. User Journey 2

The second user journey asked respondents to navigate the webpage to try and have their blood pressure checked at their GP practice. Once again 3 respondents failed to complete the task (1 respondent the same as previous task), 6 respondents felt it took longer than they expected and about what they expected, while 5 respondents felt it was quicker than what they expected. All respondents that felt it took longer than expected were previous users, whereas four of those that felt it was quicker had not used GP web services before and one was unsure if they had used the web services before.

Nine respondents felt the site was either very easy or easy to navigate, while 6 respondents felt the site was very difficult or difficult to navigate and five respondents had a neutral view of the ease of navigating the website. Of those who felt the site was very easy or easy to navigate, seven of the respondents had not used these services before, one had and one was unsure if they had. In comparison, five of the respondents that felt it was very difficult or difficult where previous users and only one respondent that identified this was not a previous user of GP web services.

Six of the respondents felt that the rooms were confusing, as they did not know if they needed treatment room, consulting room or health review. One respondent reported finding it to not be *“obvious which tile to click on”* and resorting to *“looking up blood pressure in the A-Z. I went back and chose Health Review, clicked on BP and then filled in the form.”* Additionally, one respondent identified the need for a more direct appointment link which could streamline the process by allowing patients to fill out an *“appointment form for a nurse in the blood pressure review section and vice versa.”* However, three respondents found this task to be straightforward and one respondent felt the task was quick and clear to complete.

## 8. User Journey 3

The final user journey asked respondents to complete an enquiry and specify a telephone phone call with their GP during the patient’s non-working hours. Consistent with the previous task, the same three respondents failed to complete the task, while four respondents felt it took longer than they expected. The largest proportion of responses (9 respondents) felt that the task took about as long as they expected. Additionally four participants felt the process was quicker than they expected. Three of the four respondents that felt the task took longer than expected were previous users of GP web services and only one respondent had not used the service before. Five non-users felt the task took about as long as they expected, compared to three users and one respondent that was unsure if they had used the service before. Three of the four respondents that identified this task to be quicker to complete than they expected were not previous users and only one respondent was a previous user of GP web services.

Eight respondents felt the site was either very easy or easy to navigate, while five respondents felt the site was very difficult or difficult to navigate and seven respondents had a neutral view of the ease of navigating the website. Six of the eight respondents that found the site easy or very easy to navigate were non-users, whereas only one respondent that had used GP web services before identified this and one respondent was unsure if they had used these services before. Four of the five respondents that found the site very difficult or difficult to use were existing users of the site, and only one was a previous non-user.

The largest proportion of respondents (4 comments) found this journey to have been confusing. One of these responses identified the need for a specific box for booking an appointment. This is summarised through their comments which states *“If there was a simple box saying ‘Make a telephone appointment with a GP’ and then ‘Telephone/ video/face to face’ right at the beginning, I would have got there so much more quickly”*. This is echoed in future comments that state that there *“Needs to be a specific box re appointments. Should be able to book both face to face, online and telephone appointments with nurse and doctor online. Needs to be encouragement for people to do this online to free up the telephone for more urgent enquiries and for those people who do not have access to the internet to get through on the phone more quickly”*.

## 9. Searching for Information

Finally, respondents were asked to search the website for information about how to stop smoking. For this task, no respondents failed to complete the task with the largest proportion of respondents (10 respondents) completing the task in a time quicker than they expected. On top of this four respondents felt this task took about as long as they expected and the final four respondents felt it took longer than they expected. Five of the ten respondents that found the task quicker to complete

were previously non-respondents and four were previous users of GP web services, while one respondent was unsure if they had used GP web services before. There was an even split between previous users and non-users for respondents that felt it took about as long as expected and longer than expected, with two respondents for each.

This task also saw the largest number of respondents finding the site very easy or easy to navigate at 12 respondents, while only two respondents found it to be very difficult or difficult. Half of the respondents that found the site very easy or easy to navigate were previous non-users of GP web services, five had used the services before and one was unsure if they had used GP web services before. Of the two respondents that the site to be very difficult or difficult to use, there was one respondent that was a user of GP web services and one respondent that was a previous non-user.

The largest proportion of respondent (four comments) found this process to be easy, while two respondents highlighted that it did not feel what the wellbeing centre contained and one respondent felt that the sections on the website sounded the same and contained overlapping information. The majority of respondents (12 comments) reported the next steps for stopping smoking as being clear, while one respondent found it to be unclear and a further one reported it being unhelpful as it does not provide any self-help information.

One respondent's view of the information provided demonstrates the unhelpfulness of the site as it provides *"no self-help information or details about what help (sweets, gum etc.) I might be able to get on the NHS. Just redirection to one to one consultations or groups sessions which I would never attend."*

This user journey found the main issue of the site (two respondents for each theme) to be that it is difficult to navigate, has confusing room names and requires a better search function. It was also mentioned by two respondents that the site was becoming easier to use the more that they used it.

## 10. Conclusion and Next Steps

Overall respondents showed a liking of the website design and layout, but disliked the rooms and tile system as they do not provide insight as to what each area of the website allows users to do. One respondent identified a potential description for each room such as *"Treatment Room – for immediate help with minor illnesses and injuries. Consulting Room – on-line diagnosis. Nurse appointments. Wellbeing Centre – advising on what you may be going through just now"*.

Tasks on the website were shown to repeatedly take longer than expected to complete, with there always being one fifth or more of respondents selecting this choice. The average digital score for users that failed to complete a task is 26, which is marginally above the average digital score of all respondents. The only task that no respondents failed to complete was the final journey where they were asked to find advice about stopping smoking. This coincides with this being the only task that saw a majority of respondents completing it in a time that was faster than they expected.

Throughout tasks 1, 2 and 3 the largest or joint largest proportion of responses found the time taken for the task to be about what respondents expected, with the lowest score arising in journey 2 where it was the same as those who felt it took longer than expected, at 6 respondents each.