

# User satisfaction with commuter walk-in centres

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## ABSTRACT

Pilot commuter walk-in centres have been located close to national rail stations in major English cities, provided by private healthcare companies for the NHS, and offering access to doctors and nurses. This study used a survey to evaluate user satisfaction levels with this new service. Thirty-three per cent (1828/5574) of users completed a questionnaire. Centres demonstrated high levels of user satisfaction (69% 'very satisfied', 95% confidence interval = 58% to 79%) overall, but satisfaction was lower for some aspects of care such as waiting times.

### Keywords

evaluation studies; health policy; primary health care; patient satisfaction.

## INTRODUCTION

There are currently over 80 walk-in centres in England, located in a variety of settings, most of which offer a nurse-led service. A national evaluation of 40 walk-in centres found that 80% of users were 'very satisfied' with the service received.<sup>1</sup> In 2004 the government announced a pilot of seven walk-in centres specifically aimed at people travelling to work by train. These commuter walk-in centres have different aims, and client groups who may have different experiences and satisfaction. In particular, short waiting times may be more important to commuters. As part of a wider evaluation of commuter walk-in centres, reported in an accompanying paper,<sup>2</sup> satisfaction levels with this new service were measured.

## METHOD

A survey was undertaken to determine how the centres were used and satisfaction with different aspects of care. A user questionnaire was developed, based on one used in the evaluation of general walk-in centres and interviews of users of the new service.<sup>1</sup> The questionnaire had two parts: the first part, for completion before the consultation, covered reasons for using the walk-in centre, commuting status, and sociodemographic details; the second part, for completion after the consultation, covered waiting time, treatment, referral, and satisfaction. The intention was to ask 600 users in each centre to complete a questionnaire, totalling 3600. Six 'questionnaire days' were selected, when reception staff would hand a questionnaire to all attendees that day. On these days reception staff were asked to give every user an information sheet, questionnaire, and reply-paid envelope. Responders could choose to return the completed questionnaire to a box in the reception or post it back to the research team in a reply-paid envelope. No reminders were sent to non-responders. In practice, there were between 10 and 14 'questionnaire days' in each centre, mainly due to lower than expected numbers using the service.<sup>2</sup>

Responses were entered into SPSS (version 14) for analysis. Descriptive statistics were calculated for all survey questions, and comparisons made between individual centres. Differences between centres were

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tested using  $\chi^2$  for proportions. Clustering by centre was taken into account when calculating 95% confidence intervals (CIs) for key estimates, by using the 'regress' command with the 'cluster' option in STATA (version 9.2).

## RESULTS

### Response rate

Routine data from the centres on numbers of users was not available due to commercial sensitivity. Therefore, response rates were calculated based on reports by the centre staff of numbers attending; it was estimated there were 5574 users of the service on the 'questionnaire days'. Of these, 3160 (57%) were given, and accepted, a questionnaire. A total of 1828/3160 questionnaires were completed, giving a response rate of 58%. The response rate varied between centres and two had a response rate of over 70%. Overall, only 33% of users completed a questionnaire. Item-response rates reduced for later items on the questionnaire because some responders did not complete the whole questionnaire. Service characteristics and users are described in the accompanying paper.<sup>2</sup>

### Reasons for using the commuter walk-in centres

The questionnaire asked for the main reasons for attending the service that day (Figure 1). The two most frequent reasons were convenience of the service and that it was quicker to get an appointment than in general practice. Only 12% (225/1815) of survey responders reported that they used it because they travelled to work, whereas 40% (726/1815) used it because they worked. If the service had not been available, 54% (918/1703) of users reported they would have visited their general practice and 11% (196/1703) an emergency department, while 15% (258/1703) would have looked after the problem themselves.

### Experience

Most users (80%, 1203/1500) reported that they were seen within 30 minutes; 47% (655/1390) of users

## How this fits in

Walk-in centres are part of primary care provision in England. Centres specifically for commuters were piloted. Users were satisfied overall with care but were less satisfied with waiting times.

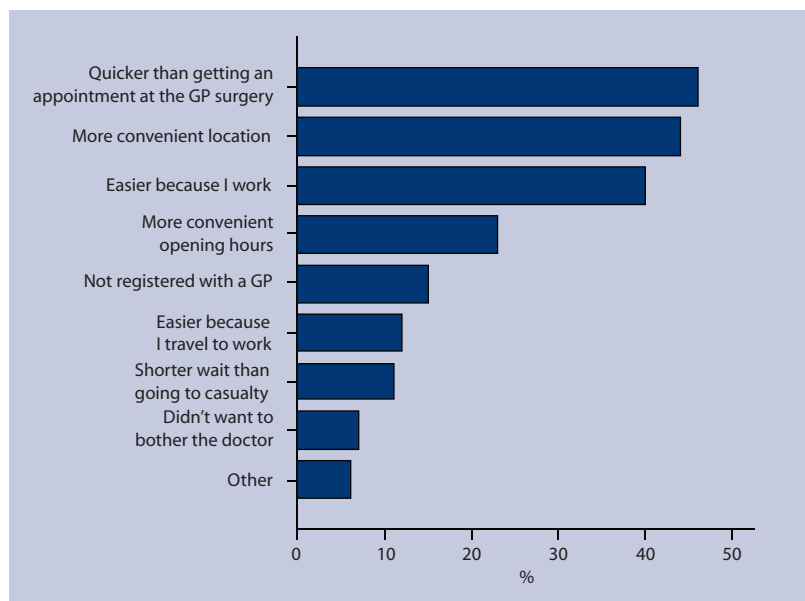


Figure 1. Main reasons for choosing commuter walk-in centre rather than elsewhere (n = 1815).

reported being treated by a doctor, or by both a doctor and a nurse. Most users (77%, 1174/1524) reported receiving advice and information about their health problems, 34% (515/1524) reported obtaining a prescription, and 10% (159/1524) were referred on to their GP. Sixty-two per cent (950/1524) of users felt that the doctor or nurse had dealt with their problem totally; 50% (735/1474) of users intended to self-care on leaving the centre and 25% (365/1474) intended to go to their GP.

### Satisfaction

Overall satisfaction was high, with 69% (95% CI = 58% to 79%) of users very satisfied with the service overall (Table 1). There was variation in satisfaction

Table 1. User satisfaction levels with different aspects of care (n = 1587).

	Very satisfied, %	Fairly satisfied, %	Uncertain, %	Not very satisfied, %	Not satisfied at all, %
Receptionist attitude	71	26	2	1	<1
Time waited	60	29	6	4	1
Nurse/doctor attitude	78	17	2	2	<1
Explanation given	70	21	6	2	<1
Treatment or advice	67	24	6	2	1
Overall satisfaction	69	25	4	1	1

**Table 2. Treatment received at the commuter walk-in centres.**

	In London, %			Out of London, %			Total, %
	A	B	C	D	E	F	
Professional seen							
Doctor	28	6	24	11	45	49	28
Nurse	64	91	39	47	40	42	53
Doctor and nurse	8	3	37	42	15	8	19
<i>n</i> = 100%	237	216	273	161	345	158	1390
Outcome							
Prescription	35	28	45	35	24	38	34
Medication	7	4	10	7	4	5	6
Treatment, not medication	8	7	19	10	9	7	10
Referred to GP	13	19	5	8	9	10	10
Referred to emergency department/hospital	8	8	2	3	3	5	5
Asked to return to centre	5	<1	3	8	4	2	4
Other (including advice)	24	34	16	29	47	33	31
<i>n</i> = 100%	254	237	296	193	359	185	1524

**Table 3. Percentage receiving definitive care at commuter walk-in centre.**

	In London, %			Out of London, %			Total, %
	A	B	C	D	E	F	
Centre dealt with the problem							
Totally	65	50	65	75	56	69	62
Partly	30	42	28	23	36	28	32
No	5	8	7	2	8	3	6
<i>n</i> = 100%	250	238	297	196	362	182	1525
Intention:							
Visit GP	22	35	23	19	24	26	25
Go to emergency department/hospital	11	8	4	4	3	6	5
Self-care	48	42	51	56	53	49	50
Other	19	15	22	21	20	19	20
<i>n</i> = 100%	242	229	289	184	351	179	1474

with different aspects of care, with responders being least satisfied with the time they waited to see the doctor or nurse, and most satisfied with the attitude of the nurse or doctor treating them.

#### **Variation between centres**

There was variation between individual centres in relation to the type of health professional seen by patients ( $P = 0.001$ ), waiting times ( $P = 0.001$ ), and satisfaction with waiting times ( $P = 0.001$ ). Centre 'B' in particular was different from the other centres, in terms of both service offered and satisfaction. This centre had a very low rate of reported doctor use (9%, 20/216) compared with the other centres (54%, 635/1174), and also referred more patients to their GP (19%, 44/237) than the other centres (9%, 115/1284) (Table 2). Fewer patients using centre 'B' felt that their problem had been totally dealt with (Table 3). Twenty-four per cent (56/233) of users in centre 'B' reported waiting more than 40 minutes, compared to 7% of all other users (92/1267) (Table 4), and 15% (37/241) of users in centre 'B' reported

dissatisfaction with the time they waited, compared to 4% (50/1304) dissatisfied for all other centres. Centre 'B' also performed less well than the other centres on most aspects of satisfaction (Table 5), and only 51% of users of centre 'B' (123/239) stated they would definitely return to use the centre again, compared with 69% (897/1298) in other centres.

## **DISCUSSION**

### **Summary of main findings**

People used commuter walk-in centres because they were convenient and it was quicker to get an appointment than at a GP surgery. Users appeared satisfied with the centres overall, but were least satisfied with waiting times. Not all centres functioned in the same way, with one centre appearing to have lower satisfaction levels than the others.

### **Strengths and limitations of the study**

The exact number of people using the service was unavailable due to lack of access to routine data. Sampling bias may have been introduced, as some

**Table 4. Reported waiting time and satisfaction with waiting times.**

	In London, %			Out of London, %			Total, %
	A	B	C	D	E	F	
Waiting times, minutes							
<10	72	16	13	49	58	46	43
11–30	26	41	48	43	36	30	37
31–40	2	19	21	5	4	9	10
>40	<1	24	18	3	2	15	10
<i>n</i> = 100%	253	233	296	184	359	175	1500
Satisfaction with time waited							
Very satisfied	79	28	41	76	75	58	60
Fairly satisfied	18	45	42	19	20	28	29
Uncertain	3	11	10	3	3	5	6
Not satisfied	<1	15	8	2	2	9	5
<i>n</i> = 100%	253	233	296	222	359	175	1538

**Table 5. Percentage of users 'very satisfied' with different aspects of the commuter walk-in centres.**

	In London, %			Out of London, %			Total, %
	A	B	C	D	E	F	
Receptionist attitude	68	61	59	83	81	72	71
Time waited	79	28	41	76	75	58	60
Nurse/doctor attitude	87	68	73	92	75	80	78
Explanation given	80	59	68	80	66	73	70
Treatment or advice	74	53	67	74	64	73	67
Overall satisfaction	78	51	62	79	72	72	69
<i>n</i> = 100%	259	250	312	205	370	191	1587

receptionist staff did not give surveys to patients they considered were too ill or did not speak English. The response rate was lower than intended and this may have introduced non-response bias. A particular concern is that users who were in a hurry did not complete the questionnaire.

### Comparison with existing literature

The percentage of patients who were very satisfied with this service was lower than for general walk-in centres:<sup>1</sup> 69% versus 80%. A key characteristic of this service was access to a doctor. Although 47% of users overall saw a doctor, one centre operated more like a general walk-in centre, where 87% of users normally consulted a nurse.<sup>1</sup> Similar proportions of users intended to visit a GP compared with general walk-in centres (25% versus 32% respectively),<sup>1</sup> or to attend an emergency department (6% versus 7%).<sup>1</sup>

### Implications for clinical practice

The walk-in centres made access to care easier for some patients. Patient satisfaction levels were high enough to maintain future use. Waiting time was a key issue, and any increases could affect user satisfaction in the future.

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### Ethics approval

Ethics approval was given by Brighton East LREC (07/Q1907/22).

### Competing interests

The authors have stated that there are none.

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